APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Special Temporary Authority – Chevak C–Band

1. Applicant

Name: GCI Communication Corp. Phone Number: 907–868–5615

DBA Name: Fax Number: 907–868–9817

Street: 2550 Denali St, Ste 1000 E-Mail: licensemanager@gci.com

City: Anchorage State: AK

Country: USA **Zipcode:** 99503 –2737

Attention: Ms Cynthia L Hall

2. Contact				
Name:	Cindy L Hall	Phone Number:	907-868-5615	
Company	: GCI Communication Corp.	Fax Number:	907-868-9817	
Street:	2550 Denali St, Ste 1000	E–Mail:	chall2@gci.com	
City:	Anchorage	State:	AK	
Country:	USA	Zipcode:	99503 –2737	
Attention	:	Relationship:	Same	
application. Please en 3. Reference File Nur 4a. Is a fee submitto If Yes, complete a Governmental En Other(please expl	ter only one.) mber SESSTA2018042300391 or Seted with this application? and attach FCC Form 159. If No, is attity Noncommercial education lain):	Submission ID ndicate reason for fee exemptional licensee	ne file number or the IB Submission ID of the relation of the relation (see 47 C.F.R.Section 1.1114).	ited
4b. Fee Classification	CGX – Fixed Satellite Transmit/F	Receive Earth Station		
5. Type Request Use Prior to Gran	nt Char	nge Station Location	O Other	
6. Requested Use Prio 07/24/2018	or Date			
7. CityChevak		8. Latitude (dd mm ss.s h)	8. Latitude (dd mm ss.s h) 61 31 47.8 N	

9. State AK	10. Longitude (dd mm ss.s h) 165 34 51.1 W			
11. Please supply any need attachments.				
Attachment 1: Exhibit 1 Attachment 2:	Attachment 3:			
12. Description. (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)				
GCI Communication Corp. is seeking an extension of its special temporary authorization (STA) (File No. SES-STA-20180423-00391) to continue to operate, for 60 days or less pending a decision on its application for regular authority, a fixed satellite earth station in the C-Band.				
13. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.				
14. Name of Person Signing Jimmy Sipes	15. Title of Person Signing VP, Network Services & Chief Engineer			
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).				

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