## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 60 day STA – Ka-band Antenna – E2198 – Red Devil

1. Applicant

Name: Alascom, Inc. Phone Number: 202–457–3032

**DBA Name:** Fax Number: 202–457–3071

Street: 1120 20th Street, NW E–Mail: jackie.flemming@att.com

**Suite 1000** 

City: Washington State: DC

Country: USA Zipcode: 20036 -

**Attention:** Jacquelyne Flemming

2. Contact			
Name:	Scott Wood	Phone Number:	907–264–7869
Company:	Alascom, Inc.	Fax Number:	
Street:	505 E. Bluff	E–Mail:	
	MP288		
City:	Anchorage	State:	AK
Country:	USA	Zipcode:	99501 –
Attention:		Relationship:	
application. Please ente 3. Reference File Num 4a. Is a fee submittee If Yes, complete and Governmental Entir Other(please explain	r only one.) ber SESMODINTR201903 d with this application? d attach FCC Form 159. ty Noncommercial econ):	3978 or Submission ID  If No, indicate reason for fee exemption ducational licensee	file number or the IB Submission ID of the related (see 47 C.F.R.Section 1.1114).
4b. Fee Classification	CGX – Fixed Satellite Tra	nsmit/Receive Earth Station	
5. Type Request  O Use Prior to Grant	(	Change Station Location	Other
6. Requested Use Prior	Date		
7. CityRed Devil		8. Latitude (dd mm ss.s h)	61 46 56.0 N

9. State AK	10. Longitude			
	(dd mm ss.s h) 157 20 4.0 W			
11. Please supply any need attachments.				
Attachment 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.)				
Applicant requests 60 day STA to construct and operate a new Ka-band earth station antenna. See Call Sign E2198. See SES-MOD-INTR2019-03978.				
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 Chris Brown	15. Title of Person Signing Director Network Services			
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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