## 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 – KZ27 Minchumina

| lame:     | Alascom, Inc.        | Phone Number: | 202-457-3032            |
|-----------|----------------------|---------------|-------------------------|
| BA Name:  |                      | Fax Number:   | 202-457-3071            |
| treet:    | 1120 20th Street, NW | E-Mail:       | jackie.flemming@att.com |
|           | Suite 1000           |               |                         |
| City:     | Washington           | State:        | DC                      |
| Country:  | USA                  | Zipcode:      | 20036 –                 |
| ttention: | Jacquelyne Flemming  |               |                         |

| 2. Contact  |               |                        |              |  |  |  |
|---|---------------|------------------------|--------------|--|--|--|
| 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:  |               | <b>Relationship:</b>   |              |  |  |  |
|   |               |                        |              |  |  |  |
| <ul> <li>(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)</li> <li>3. Reference File Number SESMODINTR201903999 or Submission ID</li> <li>4a. Is a fee submitted with this application?</li> <li>If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).</li> <li>Governmental Entity</li> <li>Noncommercial educational licensee</li> </ul> |               |                        |              |  |  |  |
| • Other(please explain):  |               |                        |              |  |  |  |
| 4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station   |               |                        |              |  |  |  |
| 5. Type Request         • Use Prior to Grant         • Change Station Location  |               |                        |              |  |  |  |
| 6. Requested Use Prior  | Date          |                        |              |  |  |  |
| 7. CityMinchumina   |               | 8. Latitud<br>(dd mm s |              |  |  |  |

| 9. State AK  | 10. Longitude<br>(dd mm ss.s h) 152 18 46.0 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<br>antenna. See Call Sign KZ27; File No. SES-MOD-INTR2019-03999.  |  |  |  |  |  |  |
| 13. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is<br>subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act<br>of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.<br>See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes. |  |  |  |  |  |  |
| 14. Name of Person Signing<br>Chris Brown  | 15. Title of Person Signing<br>Director Network Services |  |  |  |  |  |
| WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT<br>(U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION<br>(U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).  |  |  |  |  |  |  |

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