## 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 – E6216 Kakhonak

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 East Bluff Drive	E-Mail:			
	MP288				
City:	Anchorage	State:	AK		
Country:	USA	Zipcode:	99501 –		
Attention:		Relationship:	Relationship:		
application. Please ento 3. Reference File Num  4a. Is a fee submitte If Yes, complete ar	er only one.) aber SESMODINTR201904012 ad with this application?	or Submission ID o, indicate reason for fee exemption	n (see 47 C.F.R.Section 1.1114).	ated	
Other(please expla	in):				
4b. Fee Classification	CGX – Fixed Satellite Transm	nit/Receive Earth Station			
5. Type Request					
O Use Prior to Grant O Change Station Location O Other					
6. Requested Use Prior	Date				
7. CityKakhonak		8. Latitude (dd mm ss.s h)	59 26 29.0 N		

9. State AK	10. Longitude				
9. State AK	(dd mm ss.s h) 154 45 10.0 W				
11. Discos sumulu carr a sad ette characte	<u> </u>				
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 E6216; File No. SES-MOD-INTR2019-04012.					
L					
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	15. Title of Person Signing				
Chris Brown	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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