## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 60–Day STA Extension (OTZ Sites)

1. Applicant

Name: Alaska Communications Internet, **Phone Number:** 907–297–3000

LLC

**DBA Name:** Fax Number: 907–297–3153

Street: 600 Telephone Avenue E–Mail: Lisa.Phillips@acsalaska.com

MS #60

City: Anchorage State: AK

Country: USA Zipcode: 90503 -

**Attention:** Ms. Lisa Phillips

2. Contact			
Name:	Richard Cameron	Phone Number:	2022304962
Company:	LMI Advisors	Fax Number:	
Street:	2550 M Street NW	E-Mail:	rcameron@lmiadvisors.com
	Suite 343		
City:	Washington	State:	DC
Country:	USA	Zipcode:	20037 –
Attention:		Relationship:	Other
4a. Is a fee submitted  If Yes, complete and Governmental Entire Other(please explain	ber SESSTA2019080901040 d with this application? d attach FCC Form 159. If N ty Noncommercial educ n):	No, indicate reason for fee exemptional licensee	n (see 47 C.F.R.Section 1.1114).
4b. Fee Classification	CGX – Fixed Satellite Transr	mit/Receive Earth Station	
<ul><li>5. Type Request</li><li>Use Prior to Grant</li></ul>	•	Change Station Location	Other
6. Requested Use Prior 12/10/2019	Date		
7. CityVarious		8. Latitude (dd mm ss.s h)	0 0 0.0

9. State AK	10. Longitude (dd mm ss.s h) 0 0 0.0			
11. Please supply any need attachments.				
Attachment 1: Narrative Attachment 2: Technical	al Appendix Attachment 3: Draft 312 Schedule B			
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.)				
60-Day STA Extension for OTZ Sites.				
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 Rick Benken	15. Title of Person Signing VP			
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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