

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
Request for STA to continue to operate C-band teleport in Seward, Alaska.

1. Applicant

Name:	TelAlaska Cellular, Inc.	Phone Number:	907-563-2003
DBA Name:		Fax Number:	907-565-5539
Street:	201 E 56th Avenue	E-Mail:	administration@telalaska.com
City:	Anchorage	State:	AK
Country:	USA	Zipcode:	99518 -
Attention:	Mr Jason Louvier		

2. Contact

Name:	Richard D Rubino	Phone Number:	2028285519
Company:	Blooston, Mordkofsky, Dickens, Duffy, & Prendergast, LLP	Fax Number:	2028285568
Street:	2120 L Street, NW Suite 300	E-Mail:	
City:	Washington	State:	DC
Country:	USA	Zipcode:	20037 -
Attention:		Relationship:	Legal Counsel

(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.)

3. Reference File Number SESAMD2019022200183 or Submission ID

4a. Is a fee submitted with this application?

- If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).
- Governmental Entity Noncommercial educational licensee
- Other (please explain):

4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date
02/19/2020

7. CitySeward	8. Latitude (dd mm ss.s h) 60 9 10.72 N
9. State AK	10. Longitude (dd mm ss.s h) 149 25 24.67 W
11. Please supply any need attachments. Attachment 1: Request for STA 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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">Request for STA to continue to operate C-band teleport in Seward, Alaska.</div>	
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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing David J. Goggins	15. Title of Person Signing President and General Manager
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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