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 – E4246 Ouzinkie

1. Applicant

Name: Alascom, Inc. Phone Number: 202–457–2030

DBA Name: Fax Number: 214–486–8185

Street: 1120 20th Street, NW E–Mail: ola.oyefusi@att.com

Suite 1000

City: Washington State: DC

Country: USA Zipcode: 20036 -

Attention: Mr Ola Oyefusi

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:		
application. Please enter 3. Reference File Num 4a. Is a fee submitte If Yes, complete an	ber SESMOD2019112201572 d with this application? d attach FCC Form 159. If N ty Noncommercial education	or Submission ID To, indicate reason for fee exemption	e file number or the IB Submission ID of the relative file number or the IB Submission ID of the relative file file number or the IB Submission ID of the relative file file file file file file file fil	lated
4b. Fee Classification	CGX – Fixed Satellite Transm	nit/Receive Earth Station		
5. Type Request				
Use Prior to Grant Change Station Location Other				
6. Requested Use Prior 04/18/2020	Date			
7. CityOuzinkie		8. Latitude (dd mm ss.s h)		

9. State AK	10. Longitude (dd mm ss.s h) 152 30 14.4 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.)					
Alascom Inc. requests a 60-day special temporary authorization to construct and operate a new back-up Ka-band antenna at its Ouzinkie earth station(call sign E4246) that will communicate with DIRECTV's SPACEWAY-2 (call sign S2133) at 138.9 W.L. The technical details for the Ka-band antenna are provided in the pending Modification Application and					
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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12. Description

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