APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Emergency support for WJ2XUG from Alaska

1. Applicant			
Name:	Universal Space Network, Inc.	Phone Number:	215-328-9130
DBA Nar	ne:	Fax Number:	215-328-9132
Street:	417 Caredean Drive	E-Mail:	jgreet@uspacenet.com
	Suite A		
City:	Horsham	State:	PA
Country:	USA	Zipcode:	19044 –
Attentior	: Joanne Greet		

2. Contact							
2. Contact							
Name:	Universal Space Network, Inc.	Phone Numb	er:	215-328	-9130		
Company:		Fax Number:		215-328-9132			
Street:	417 Caredean Drive	E-Mail:		jgreet@u	ispacenet.com		
	Suite A						
City:	Horsham	State:		PA			
Country:	USA	Zipcode:		19044	_		
Attention:		Relationship		Same			
(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 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 I 09/16/2020	Date						
7. CityNorth Pole			8. Latitude (dd mm ss.s h) 64 48 15.3 N				

9. State AK	10. Longitude (dd mm ss.s h) 147 30 0.8 W					
11. Please supply any need attachments.						
Attachment 1: FCC312 Attachment 2: Waiver I	Request Attachment 3: Support Analysis					
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.)						
USN ground station in Alaska shall be used to assist Maxar with anomaly recovery of the spacecraft WJ2XUG. The authority sought here will allow Maxar to increase the diversity of the earth stations conducting communications with the satellite and to accelerate the satellite's return to normal operations. Support is requested immediately.						
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 Joanne Greet	15. Title of Person Signing Compliance Manager					
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