

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
30-Day STA to add Capella space stations under new application

1. Applicant

Name:	Maris Developments	Phone Number:	800-927-9800
DBA Name:		Fax Number:	
Street:	251 Little Falls Dr.	E-Mail:	
City:	Wilmington	State:	DE
Country:	USA	Zipcode:	19808 -
Attention:			

2. Contact	
Name: K. McCarty	Phone Number: 800-927-9800
Company: Maris Developments	Fax Number:
Street: 251 Little Falls Dr.	E-Mail: maris.developments@outlook.com
City: Wilmington	State: DE
Country: USA	Zipcode: 19808 -
Attention:	Relationship: Engineer
(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 Date	
7. City Boardman	8. Latitude (dd mm ss.s h) 0 0 0.0

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