

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
60-Day STA renewal to provide connectivity services for the Navajo Nation during the COVID-19 pandemic

1. Applicant

Name:	MCI Communications Services, LLC	Phone Number:	703-694-5088
DBA Name:		Fax Number:	
Street:	22001 Loudoun County Parkway	E-Mail:	patrick.merrick@verizon.com
City:	Ashburn	State:	VA
Country:	USA	Zipcode:	20147 -
Attention:	Patrick Merrick		

2. Contact

Name:	MCI Communications Services, LLC	Phone Number:	703-694-5088
Company:	Verizon	Fax Number:	
Street:	600 Hidden Ridge M.C. HQE03H07	E-Mail:	patrick.merrick@verizon.com
City:	Ashburn	State:	VA
Country:	USA	Zipcode:	20147 -
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 SESSTA2020111601256 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 CGV – Fixed Satellite VSAT System

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date
03/01/2021

7. CityWindow Rock	8. Latitude (dd mm ss.s h) 35 40 29.6 N
9. State AZ	10. Longitude (dd mm ss.s h) 109 3 26.61 W
11. Please supply any need attachments. Attachment 1: Narrative & Analysis Attachment 2: Freq Coordination Attachment 3: Form 312 & Rad Haz	
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;">MCI seeks a 60-Day STA extension of previous STA SES-STA-20201116-01256. This STA is prior to license approval (SES-LIC-20210113-00047 Call Sign</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 April Yalenezian	15. Title of Person Signing Wireless Engineer
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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