

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
180&#8722;day STA to provide LEOP communication for O3b mPOWER satellites

**1. Applicant**

**Name:** O3b Limited

**Phone Number:**

202-478-7100

**DBA Name:**

**Fax Number:**

**Street:** 1129 20th Street, NW, Suite 1000

**E-Mail:**

suzanne.malloy@ses.com

**City:** Washington

**State:**

**Country:** USA

**Zipcode:**

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**Attention:** Ms Suzanne Malloy

**2. Contact**

<b>Name:</b>	Kelsie Rutherford	<b>Phone Number:</b>	202-478-7191
<b>Company:</b>	SES	<b>Fax Number:</b>	
<b>Street:</b>	1129 20th Street NW Suite 1000	<b>E-Mail:</b>	kelsie.rutherford@ses.com
<b>City:</b>	Washington	<b>State:</b>	DC
<b>Country:</b>	USA	<b>Zipcode:</b>	20036 -
<b>Attention:</b>		<b>Relationship:</b>	

(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 SESLIC2021021700350 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

01/21/2022

7. CityEl Mirage

8. Latitude  
(dd mm ss.s h) 33 33 48.4 N

9. State AZ	10. Longitude (dd mm ss.s h) 112 20 14.9 W
11. Please supply any need attachments. Attachment 1: Narrative      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.) O3b Limited ('O3b') respectfully requests earth station Special Temporary Authority for 180 days, commencing January 21, 2022, to allow its gateway earth station located in Phoenix, Arizona to communicate using Ka-band frequencies with O3b's next generation NGSO mPOWER satellites during LEOP operations.	
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 Suzanne Malloy	15. Title of Person Signing Vice President, Regulatory Affairs
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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