## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu: STA for Capella –7 and –8

| 1. Applic | ant |
|-----------|-----|
|-----------|-----|

Name: Moynk Properties, LLC **Phone Number:** 800–927–9800

DBA Name: Fax Number:

**Street:** 251 Little Falls Dr. **E–Mail:** information@moynkproperties.

com

City: Wilmington State: DE

Country: USA Zipcode: 19808 -

**Attention:** 

| 2. Contac  | t                           |  |                       |                                     |
|--|-----------------------------|--|-----------------------|-------------------------------------|
|  | Name:                       | K. McCarty   | Phone Number:         | 800-927-9800                        |
|  | Company:                    | Moynk Properties, LLC  | Fax Number:           |                                     |
|  | Street:                     | 251 Little Falls Dr.   | E–Mail:               | information@moynkproperties.<br>com |
|  | City:                       | Wilmington   | State:                | DE                                  |
|  | <b>Country:</b>             | USA  | Zipcode:              | 19808 –                             |
|  | Attention:                  |  | Relationship:         | Engineer                            |
| 4a. Is a  If Yes  Gover                                | fee submitted, complete and | over or Submission ID  I with this application? I attach FCC Form 159. If No.  y Noncommercial education |                       | tion (see 47 C.F.R.Section 1.1114). |
| 4b. Fee Cl   | lassification               | CGX – Fixed Satellite Transmit   | Receive Earth Station |                                     |
| 5. Type Re   | equest                      |  |                       |                                     |
| O Use Prior to Grant O Change Station Location O Other |                             |  |                       |                                     |
| 6. Reques  | ted Use Prior               | Date   |                       |                                     |

| 7. CityKapolei  | 8. Latitude (dd mm ss.s h) 21 20 12.5 N   |  |  |  |  |
|---|---|--|--|--|--|
| 9. State HI   | 10. Longitude (dd mm ss.s h) 158 5 24.6 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.)  |   |  |  |  |  |
| Moynk seeks STA to add space stations Capella-7 and -8 (Call Sign S3100) as additional points of communication to its fixed earth station located in Kapolei, Hawaii (Call Sign E202006). Please see narrative.  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 K. McCarty   | 15. Title of Person Signing 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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