

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA Mobile-VSAT

1. Applicant

Name:	Expedition Communications	Phone Number:	+491522742978
DBA Name:		Fax Number:	
Street:	Pikk 11	E-Mail:	santiago@hydeandassociates.com
City:	Tallinn	State:	
Country:		Zipcode:	-
Attention:	Mr Santiago D Palacio		

2. Contact			
Name:	Mr. Santiago Palacio	Phone Number:	+491522742978
Company:	Hyde and Associates	Fax Number:	
Street:	Pikk 11	E-Mail:	santiago@hydeandassociates.com
City:	Tallinn	State:	
Country:	Estonia	Zipcode:	11023 –
Attention:		Relationship:	Legal Counsel
(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 SESLIC2022051900577 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 06/04/2022			

7. City Agana Heights	8. Latitude (dd mm ss.s h) 13 28 4.08 N
9. State GU	10. Longitude (dd mm ss.s h) 144 44 43.08 E
11. Please supply any need attachments. Attachment 1: Application Letter Attachment 2: Technical Specs Attachment 3: Antenna Datasheet	
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.) Application for a Special Temporary Authority STA in relation to mobile VSAT that serves to assist in case of disaster. Testing is urgent given the rapid approach of the hurricane season in Guam.	
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. ☒ Yes ☐ No	
14. Name of Person Signing Santiago Palacio	15. Title of Person Signing Legal Counsel
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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