

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

Application for STA for five u8 Pro terminals to operate as ESAA

1. Applicant

Name:	Kymeta Corporation	Phone Number:	4258963700
DBA Name:		Fax Number:	
Street:	12277 134th Court, NE	E-Mail:	ryans@kymetacorp.com
City:	Redmond	State:	WA
Country:	USA	Zipcode:	98052 -
Attention:	Mr. Ryan Stevenson		

2. Contact			
Name:	Robert S. Koppel	Phone Number:	3013185213
Company:	Koppel Telecom Law PLLC	Fax Number:	
Street:	9404 Duxford Court	E-Mail:	koppelb@koppeltelecomlaw.com
City:	Potomac	State:	MD
Country:	USA	Zipcode:	20854 –
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 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			
5. Type Request			
☒ Use Prior to Grant ☐ Change Station Location ☐ Other			
6. Requested Use Prior Date			
04/16/2023			

7. CityRedmond	8. Latitude (dd mm ss.s h) 0 0 0.0 N
9. State WA	10. Longitude (dd mm ss.s h) 0 0 0.0 W
11. Please supply any need attachments. Attachment 1: Narrative Statement 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.) STA for five u8 Pro terminals to operate as ESAA.	
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 Ryan Stevenson	15. Title of Person Signing Vice President and Chief Scientist
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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