

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

MuSat-1 STA

1. Applicant

Name:	Microsoft Infrastructure Group, LLC	Phone Number:	425-703-3651
DBA Name:		Fax Number:	
Street:	One Microsoft Way	E-Mail:	gunnarh@microsoft.com
City:	Redmond	State:	WA
Country:	USA	Zipcode:	98052 -
Attention:	Mr Gunnar Halley		

2. Contact			
Name:	Paul	Phone Number:	2027301319
Company:	HWG LLP	Fax Number:	
Street:	1919 M St. NW	E-Mail:	pcaritj@hwglaw.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 -
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 SESMOD2023031400283 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			
06/08/2023			
7. City		8. Latitude	
		(dd mm ss.s h) 0 0 0.0	

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0
11. Please supply any need attachments. Attachment 1: Description 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.) Special Temporary Authority to communicate with MuSat-1	
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 Paul Caritj	15. Title of Person Signing 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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