

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA request pending license grant Point Lay, AK. Submission ID IB2019000814

1. Applicant

Name:	Arctic Slope Telephone Association Cooperative, Inc.	Phone Number:	907-563-3989
DBA Name:		Fax Number:	907-563-1932
Street:	4300 B Street, Suite 501	E-Mail:	clover@astac.net
City:	Anchorage	State:	AK
Country:	USA	Zipcode:	99503 -
Attention:	Ms Clover McNeil		

2. Contact

Name:	Brian DeMarco	Phone Number:	907 244-2160
Company:	Arctic Slope Telephone Association Cooperative, Inc	Fax Number:	
Street:	4300 B Street, Suite 501	E-Mail:	briand@astac.net
City:	Anchorage	State:	AK
Country:	USA	Zipcode:	99503 -
Attention:		Relationship:	

(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 IB2019000814

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
02/01/2020

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