APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA for Use Prior to Grant

1. Applicant					
Name:	UNIVERSITY OF ALASKA DBA	Phone Number:	907-474-1891		
DBA Name	:	Fax Number:	907-474-5064		
Street:	PO Box 755620	E-Mail:	gretchen.kuac@alaska.edu		
	University of Alaska				
City:	FAIRBANKS	State:	AK		
Country:	USA	Zipcode:	99775 –		
Attention:	Gretchen C. Gordon				

2 Contact						
2. Contact						
Name:	Ryan Wilhour	Phone Numb	ber: 352–332–3157			
Company:	Kessler and Gehman Associates, Inc.	Fax Number	••			
Street:	507 NW 60th ST	E-Mail:	ryan@kesslerandgehman.com			
	STE D					
City:	Gainesvill	State:	FL			
Country:	USA	Zipcode:	32607 –			
Attention:		Relationship	Engineer			
(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 SESLIC2019120301606 or Submission ID						
	ed with this application?					
Y -			fee exemption (see 47 C.F.R.Section 1.1114).			
•	ity O Noncommercial educational	licensee				
• Other(please explain):						
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station						
5. Type Request						
Use Prior to Grant O Change Station Location O Other						
6. Requested Use Prior Date 03/20/2020						

7. CityFairbanks	8. Latitude (dd mm ss.s h) 64 51 30.2					
9. State AK	10. Longitude (dd mm ss.s h) 147 49 7.1					
11. Please supply any need attachments.						
Attachment 1: STA RequestAttachment 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.)						
See Attachment 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 Wilhour	15. Title of Person Signing Consulting 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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