

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
30-Day STA to add Capella-5 and -6 as POC

1. Applicant

Name:	Haras Development	Phone Number:	800-927-9800
DBA Name:		Fax Number:	
Street:	251 Little Falls Dr.	E-Mail:	
City:	Wilmington	State:	DE
Country:	USA	Zipcode:	19808 -
Attention:			

2. Contact

Name:	K. McCarty	Phone Number:	800-927-9800
Company:	Haras Development	Fax Number:	
Street:	251 Little Falls Dr.	E-Mail:	
City:	Wilmington	State:	DE
Country:	USA	Zipcode:	19808 -
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 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

7. City/Dublin

8. Latitude
(dd mm ss.s h) 0 0 0.0

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