

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
Special Temporary Authority for pending Modification of E960222, FCC IB2021001772

**1. Applicant**

<b>Name:</b>	Denali 20020, LLC	<b>Phone Number:</b>	5096891000
<b>DBA Name:</b>		<b>Fax Number:</b>	509-689-3798
<b>Street:</b>	66 C Teleport Drive	<b>E-Mail:</b>	TOCC@usei-teleport.com
<b>City:</b>	Brewster	<b>State:</b>	WA
<b>Country:</b>	USA	<b>Zipcode:</b>	98812 -
<b>Attention:</b>	Darryl White		

**2. Contact**

<b>Name:</b>	Darryl White	<b>Phone Number:</b>	5096891000
<b>Company:</b>	Denali 20020, LLC	<b>Fax Number:</b>	
<b>Street:</b>	66 C Teleport Drive	<b>E-Mail:</b>	TOCC@usei-teleport.com
<b>City:</b>	Brewster	<b>State:</b>	WA
<b>Country:</b>	USA	<b>Zipcode:</b>	98812 -
<b>Attention:</b>		<b>Relationship:</b>	

(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 IB2021001772

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  
05/12/2021

7. CityBrewster

8. Latitude  
(dd mm ss.s h) 48 8 50.5 N

9. State WA	10. Longitude (dd mm ss.s h) 119 41 33.2 W
11. Please supply any need attachments. Attachment 1: 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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> STA for pending Modification of Call Sign E960222 to add extended Ku-band spectrum 13.75 - 14.0 GHz, Application Submission ID </div>	
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. <div style="text-align: right;"> <input checked="" type="radio"/> Yes      <input type="radio"/> No </div>	
14. Name of Person Signing Darryl White	15. Title of Person Signing Manager
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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