

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

Galliano, LA Temp-Fixed C-Band terminal STA Extension request

1. Applicant

Name: L3HARRIS TECHNOLOGIES, INC. **Phone Number:** 321-309-8468

DBA Name: **Fax Number:** 321-726-3139

Street: 1025 West Nasa Blvd. **E-Mail:** Michael.Feustel@L3Harris.com

City: Melbourne State: FL

Country: USA **Zipcode:** 32919

Attention: Michael Feustel

2. Contact

Name:	William LeBeau	Phone Number:	202-955-3000
Company:	HOLLAND & KNIGHT LLP	Fax Number:	202-955-5564
Street:	800 17TH STREET, NW SUITE 1100	E-Mail:	bill.lebeau@hklaw.com
City:	WASHINGTON	State:	DC
Country:	USA	Zipcode:	20006 -
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 or Submission ID IB2021004259

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

11/15/2021

7. CityGalliano

8. Latitude
(dd mm ss.s h) 29 24 50.9 N

9. State LA	10. Longitude (dd mm ss.s h) 90 17 43.5 W
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11. Please supply any need attachments.

Attachment 1: Req for Ext of STA

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.)

L3HARRIS REQUESTS A 60 DAY EXTENSION OF STA TO OPERATE A TEMPORARY-FIXED C-BAND EARTH STATION AT GALLIANO, LA TO SUPPORT FAA HOUSTON AIR ROUTE CONTROL CENTER AND NEW ORLEANS AIRPORT (MSY) OPERATIONS IMPACTED BY HURRICANE IDA

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
Michael Feustel

15. Title of Person Signing
FTI-SAT Project 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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