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File Number: SAT-STA-20031006-00311

Callsign:

FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

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APPLICANT INFORMATION

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

SBS-4 STA renewal relocate to 125W

1. Applicant

Name:	PanAmSat Licensee Corp.	Phone Number:	203-210-8000
DBA Name:		Fax Number:	203-210-8001
Street:	20 Westport Road	E-Mail:	
City:	Wilton	State:	CT
Country:	USA	Zipcode:	06897 -
Attention:	Mr James W Cuminale Esq		

2. Contact

Name:	Joseph A Godles, Esq.	Phone Number:	202-429-4900
Company:	Goldberg Godles Wiener & Wright	Fax Number:	202-429-4912
Street:	1229 19th Street, NW	E-Mail:	jgodles@g2w2.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 -2413
Contact Title:	Attorney	Relationship:	Legal Counsel

(If your application is related to an application filed with the Commission, enter the file number below.)

3. Reference File Number SATSTA2003080500141

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 CRY – Space Station (Geostationary)

5. Type Request

- Change Station Location Extend Expiration Date Other

6. Temporary Orbit Location
125 WL

7. Requested Extended Expiration Date

8. 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 attached request for extension of STA to operate SBS-4.

9. 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

10. Name of Person Signing
Kalpak Gude

11. Title of Person Signing
Associate General Counsel

12. Please supply any need attachments.

Attachment 1: STA

Attachment 2:

Attachment 3:

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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