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File Number: SAT-STA-20050818-00162

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:

G15 IOT STA

1. Applicant

| | | | |
|-------------------|-------------------------|----------------------|--------------|
| Name: | PanAmSat Licensee Corp. | Phone Number: | 202-292-4300 |
| DBA Name: | | Fax Number: | 202-292-4378 |
| Street: | 1801 K Street, N.W. | E-Mail: | |
| | Suite 440 | | |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20006 - |
| Attention: | Mr Kalpak S Gude 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 |
| Attention: | 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

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
150 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.)

PanAmSat Licensing Corp., pursuant to Section 25.120 of the Commission's rules, hereby requests Special Temporary Authority to conduct in-orbit testing of Galaxy 15 at 150 WL.

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.

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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