Approved by OMB 3060–0678

Date & Time Filed: Mar 30 2007 3:28:21:106PM File Number: SAT–STA–20070330–00059 Callsign:

## FEDERAL COMMUNICATIONS COMMISSION APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

#### FOR OFFICIAL USE ONLY

# APPLICANT INFORMATION

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

Request for 180-day STA to operate a substitute low power repeater in Las Vegas, NV

1. Applicant			
Name	: XM Radio Inc.	Phone Number:	202-380-4000
DBA 2	Name:	Fax Number:	202-380-4500
Street	1500 Eckington Place,	NE <b>E-Mail:</b>	james.blitz@xmradio.com
City:	Washington	State:	DC
Count	try: USA	Zipcode:	20002 –
Atten	tion: James S Blitz		

2. Contact									
2. Contact									
	Name:	James S. Blitz	Phone Nu	imber:	202-380-4000				
	Company:	XM Radio Inc.	Fax Number:	202-380-4500					
	Street:	1500 Eckington Place NE	E-Mail:		james.blitz@xmradio.com				
	City:	Washington	State:		DC				
	Country:	USA	Zipcode:		20002 –				
	Attention:		Relations	hip:	Same				
	· ·		th the Commiss	ion, enter either	the file number or the IB Submission ID of the related				
	Please enter								
3. Reference File Number or Submission ID									
		with this application?		<b>6</b>	- ( 47 C F.D. S ( 1, 1114)				
•••	-	attach FCC Form 159. If No, i		for fee exemption	n (see 47 C.F.K.Section 1.1114).				
1 -		Noncommercial education	nal licensee						
Other(p	please explain	n):							
4b. Fee Cla	4b. Fee Classification CRY – Space Station (Geostationary)								
5. Type Request									
Change Station Location     Extend Expiration Date     Other									
6. Temporary Orbit Location 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.)										
XM Radio Inc. (XM) requests Special Temporary Authority to operate a substitute low power terrestrial repeater (less than 2 kw EIRP) for one hundred eighty days on top of Harrah's Casino Hotel in Las Vegas pursuant to the technical parameters listed in Exhibit A.										
9. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject Yes No 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 James S. Blitz	11. Title of Person Signing VP, Regulatory Counsel									
12. Please supply any need attachments.										
Attachment 1: STA Request       Attachment 2: Exhibit			Attachment 3:							
<ul> <li>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).</li> </ul>										

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