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File Number: SAT-STA-20080923-00193

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:

Application to Renew STA To Operate on Channels 23 and 24 at 61.5 W.L.

1. Applicant

<b>Name:</b>	EchoStar Corporation	<b>Phone Number:</b>	303-723-1000
<b>DBA Name:</b>		<b>Fax Number:</b>	
<b>Street:</b>	90 Inverness Circle E.	<b>E-Mail:</b>	
<b>City:</b>	Englewood	<b>State:</b>	CO
<b>Country:</b>	USA	<b>Zipcode:</b>	80112 -
<b>Attention:</b>	Linda Kinney - (202)293-0981		

2. Contact	
<b>Name:</b> Pantelis Michalopoulos	<b>Phone Number:</b> 202-429-6494
<b>Company:</b> Steptoe & Johnson LLP	<b>Fax Number:</b>
<b>Street:</b> 1330 Connecticut Ave. NW	<b>E-Mail:</b> pmichalopoulos@steptoe.com
<b>City:</b> Washington	<b>State:</b> DC
<b>Country:</b> USA	<b>Zipcode:</b> 20036 -
<b>Attention:</b>	<b>Relationship:</b> 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 SATSTA2008032500082 or Submission ID	
4a. Is a fee submitted with this application?	
<input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).	
<input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee	
<input type="radio"/> Other (please explain):	
4b. Fee Classification	
5. Type Request	
<input type="radio"/> Change Station Location <input checked="" type="radio"/> Extend Expiration Date <input type="radio"/> Other	
6. Temporary Orbit Location	7. Requested Extended Expiration Date 2009-03-26 00:00:00.0

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.)

This application requests renewal of EchoStar Corporation's special temporary authority to operate a DBS satellite using channels 23 and 24 at the 61.5 W.L. orbital location for an additional 180 days. Please see the attached narrative.

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  
Linda Kinney

11. Title of Person Signing  
Vice President, Law and Regulation

12. Please supply any need attachments.

Attachment 1: STA Narrative

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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