

Date & Time Filed: Apr 30 2009 5:16:19:756PM

File Number: SAT-STA-20090430-00049

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:

Request to Renew STA to Relocate EchoStar 5 from 129 W.L. and to Locate it at 147.925 W.L.

1. Applicant

<b>Name:</b>	EchoStar Satellite Operating L.L. C.	<b>Phone Number:</b>	303-723-1000
<b>DBA Name:</b>		<b>Fax Number:</b>	303-723-1699
<b>Street:</b>	9601 South Meridian Boulevard	<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>	Step toe & Johnson LLP	<b>Fax Number:</b>	
<b>Street:</b>	1330 Connecticut Ave NW	<b>E-Mail:</b>	pmichalopoulos@step toe.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 or Submission ID

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

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.)

EchoStar Satellite Operating L.L.C. requests to renew its STA for an additional 60 days to relocate the EchoStar 5 satellite from 129 W.L. and to locate the satellite at the specific 147.925 W.L. location. See 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: 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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