Approved by OMB 3060–0678

Date & Time Filed: Jul 1 2009 4:22:52:486PM File Number: SAT–STA–20090701–00071 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 for Special Temporary Authority to Modify Terrestrial Repeaters in Cincinnati, Ohio for 180 Days

1. Applicant								
	Name:	Sirius XM Radio Inc.	Phone Number:	212-584-5100				
	DBA Name:		Fax Number:	212-584-5353				
	Street:	1221 Avenue of the Americas	E-Mail:					
		36th Floor						
	City:	New York	State:	NY				
	Country:	USA	Zipcode:	10020 –				
	Attention:	Patrick L. Donnelly						

2. Contact								
	Name:	James S. Blitz	Phone Nu	mber:	202-380-4000			
	Company:	Sirius XM Radio Inc.	Fax Numl	ber:	202-380-4981			
	Street:	1500 Eckington Place NE	E-Mail:		james.blitz@siriusxm.com			
	City:	Washington	State:		DC			
	Country:	USA	Zipcode:		20002 –			
	Attention:		Relations	hip:	Same			
(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 O Noncommercial educational licensee Other(please explain): 								
–								
4b. Fee Classification CXW – Space Station (Non–Geostationary)								
5. Type Request								
Change Station Location O Extend Expiration Date Other								
6. Temporary Orbit Location7. Requested Extended Ex				ded 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.)

Sirius XM Radio Inc. requests Special Temporary Authority to modify several terrestrial repeaters in Cincinnati, Ohio for 180 days 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 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	11. Title of Person Signing
James S. Blitz	Vice President, Regulatory Counsel

12. Please supply any need attachments.

Attachment 1: STA Request	Attachment 2:	Attachment 3:	

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