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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 Special Temporary Authority to Operate Two New Terrestrial Repeaters in Falls Church, Virginia for 60 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	ımber:	202-380-4000
	Company:	Sirius XM Radio Inc.	Fax Num	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	ship:	Same
4a. Is a If Yes Gover	fee submitted, complete and	with this application? I attach FCC Form 159. If No, i Noncommercial education 1):		for fee exemption (see 4	47 C.F.R.Section 1.1114).
4b. Fee Cl	assification	CXW – Space Station (Non–Geo	ostationary)		
5. Type Re	equest ge Station Loc	eation C Exte	end Expiration	Date	Other
6. Tempor	ary Orbit Loca	ation		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.)									
Sirius XM Radio Inc. requests Special Temporary Authority to operate two new low power terrestrial repeaters in Falls Church, Virginia for 60 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 James S. Blitz	11. Title of Person Signing Vice President, Regulatory Counsel								
12. Please supply any need attachments.			<u> </u>						
Attachment 1: STA Request	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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