

Date & Time Filed: Jun 26 2017 1:27:48:963PM

File Number: SAT-STA-20170626-00098

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:

STA to Move & Operate EchoStar 3 at 86.85 WL

1. Applicant

<b>Name:</b>	EchoStar Satellite Operating Corporation	<b>Phone Number:</b>	301-428-5893
<b>DBA Name:</b>		<b>Fax Number:</b>	
<b>Street:</b>	100 Inverness Terrace East	<b>E-Mail:</b>	jennifer.manner@echostar.com
<b>City:</b>	Englewood	<b>State:</b>	CO
<b>Country:</b>	USA	<b>Zipcode:</b>	80112 -
<b>Attention:</b>	Jennifer A Manner		

2. Contact

<b>Name:</b>	Jennifer A. Manner	<b>Phone Number:</b>	(301)428-5893
<b>Company:</b>	EchoStar	<b>Fax Number:</b>	(301)428-2818
<b>Street:</b>	11717 Exploration Lane	<b>E-Mail:</b>	jennifer.manner@echostar.com
<b>City:</b>	Germantown	<b>State:</b>	MD
<b>Country:</b>	USA	<b>Zipcode:</b>	20876 -
<b>Attention:</b>		<b>Relationship:</b>	

(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    CRY – Space Station (Geostationary)

5. Type Request

- Change Station Location                       Extend Expiration Date                       Other

6. Temporary Orbit Location  
86.85 W.L.

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.)

Seeking 60-day STA, commencing on or approximately July 3, 2017, to move and operate EchoStar 3 at 86.85 WL, as well as operate certain earth stations for TT&C communications. See Exhibit 1.

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  
Jennifer A. Manner

11. Title of Person Signing  
Senior Vice President, Regulatory Affairs

12. Please supply any need attachments.

Attachment 1: Narrative

Attachment 2: Technical Annex

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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