Date & Time Filed: Nov 18 2020 1:49:34:866PM File Number: SAT-STA-20201118-00136

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 an additional 30 days of Special Temporary Authority to operate Intelsat 1R (S2368) with new beam coverage

1. Applicant

Name: Intelsat License LLC, as debtor- Phone Number: 703–559–7848

in-possession

DBA Name: Fax Number: 703–559–8539

Street: 7900 Tysons One Place E–Mail: susan.crandall@intelsat.com

City: McLean State: VA

Country: USA **Zipcode:** 22101 –5972

Attention: Susan H. Crandall

2. Contact					
	Name:	Cynthia J. Grady	Phone Nu	ımber:	703–559–6949
	Company:	Intelsat US LLC	Fax Num	ber:	703–559–8539
	Street:	7900 Tysons One Place	E-Mail:		cynthia.grady@intelsat.com
	City:	McLean	State:		VA
	Country:	USA	Zipcode:		22102 -5972
	Attention:		Relations	hip:	Legal Counsel
4a. Is a f	fee submitted complete and	with this application? attach FCC Form 159. If No, Noncommercial education:		for fee exemption (see 47	C.F.R.Section 1.1114).
4b. Fee Cla	assification (CRY – Space Station (Geostatio	onary)		
5. Type Re Chang	equest	ation Ex	stend Expiration	Date	• Other
6. Tempora	ary Orbit Loca	tion		7. Requested Extended I	Expiration Date

8. Description (If the complete description)	ption does not appear in this b	oox, please go to the end of t	the form to view it in its entirety.)				
Intelsat herein request	s an additional 30 d	days of Special Tem	porary Authority to operate				
one of Intelsat 1R's Ku-band beams over a new coverage area.							
9. By checking Yes, the undersigned ce	rtifies that neither applicant n	or any other party to the app	plication is subject Yes No				
to a denial of Federal benefits that inclu			Orug Act of 1988,				
21 U.S.C. Section 862, because of a con	•		stance. See 47 CFR				
1.2002(b) for the meaning of "pa	rty to the application" for	or these purposes.					
10. Name of Person Signing			11. Title of Person Signing				
Cynthia J. Grady		Senior Counsel, Intelsat US LLC					
12. Please supply any need attachments							
Attachment 1: STA Request	Attachment 2:		Attachment 3:				
L			1				
WILLELL EALCE CTATEM	ENTS MADE ON THIS EOL	DM ADE DINICILADI E DI	Y FINE AND / OR IMPRISONMENT				
WILLFUL FALSE STATEM	ENTS MADE ON THIS FOR	KWI AKE PUNISHADLE D.	I FINE AND / OR IMPRISONMENT				
(U.S. Code Title 1	8, Section 1001), AND/OR R		CATION AUTHORIZATION				

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