# FORM 312–R APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

## APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Renewal E880958

1. Applicat	nt			
	Name:	SES Americom, Inc.	Phone Number:	609–987–4133
	<b>DBA Name:</b>		Fax Number:	609–987–4188
	Street:	4 Research Way	E-Mail:	david.barton@ses-engineering. com
	City:	Princeton	State:	NJ
	<b>Country:</b>	USA	Zipcode:	08540 – 6684
	Attention:	David Barton		

Name:	David Barton	Phone Number:	609-987-4133
Company:	SES Americom, Inc.	Fax Number:	609–987–4188
Street:	Four Research Way	E-Mail:	david.barton@ses-engineering. com
City:	Princeton	State:	NJ
Country:	USA	Zipcode:	08540 – 6684
Attention:	David Barton	<b>Relationship:</b>	Same

# RENEWAL INFORMATION

3. Rulepart under which this filing is made Rulepart 25

2	4. 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 Noncommer	cial educational licensee			
	• Other(please explain):				

5. Application is for renewal of license in exact conformity with the existing license as specified below:	
(a)File Number	(b)Date Issued
SESMOD2002091501545	2002–10–28 00:00:00.0
(c)Call Sign	(d)Location
E880958	Albuquerque, Bernalillo, NM

(e)Nature of Service Domestic Fixed Satellite Service	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)
(g)Expiration Date 2008–09–16 00:00:00.0	Petition to reinstate:
6. Note any changes such as discontinuance of use of a frequency, or of a application covering this station was filed: None	a type of emission or of a transmitter which have been made since the last

Items 7(a) and (b) apply to Part 21 licenses only. 7(a) Has there been removal of equipment or alteration of facilities as to render the Station not operational?		000	Yes No N/A
If YES when:			
(b) If this is a Multipoint Distribution Service (MDS) station, is there a ownership interest in control by, affiliation with, or leasing arrangement with a cable television company?	<ul> <li>Yes</li> <li>No</li> <li>N/A</li> </ul>		
8. Applicant represents that there has been no change in applicant's organization and that there has been no transfer applicant's relation to the station, or financial responsibility; that applicants most recent application or report embodidentified below, is to be considered as a part of this application, and the truth of the statements therein contained is here any further exceptions, not already covered in question 6 or 7. File Number Date	dying this inform	natio	on, as

If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311: Rdhz880958 If NO, Explain briefly why not: Earth Station complies with 47 CFR (A) and (B)	Yes No N/A
If NO, Explain briefly why not: Earth Station complies with 47 CFR (A) and (B)	
benefits pursuant to section 5301 of Anti–Drug Abuse Act of 1988 21 U.S.C. 853a or in the case of a nonindividual applicant (e	Yes No

- Individual
- Unincorporated Association
- Partnership
- Corporation
- Governmental Entity
- O Other (please specify)

#### 12. Please supply any need attachments.

1:	2:		3:	
CERTIFICATION				
13. Typed Name of Person Signing Nancy J. Eskenazi14. Title of Person Signing Vice President and Associate General Counsel				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / ORIMPRISONMENT (U.S. Code, Title 18, Section1001), AND/OR REVOCATION OF ANY STATIONAUTHORIZATION (U.S. Code, Title 47, Section312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).				

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