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 of E050252 Earth Station License July 2020

1. Applicant

Name: SES Government Solutions, Inc.

Phone Number:

703-610-1016

DBA Name:

Fax Number:

703-610-1030

Street:

11790 Sunrise Valley Drive

E-Mail:

rodrigo.gomez@ses-gs.com

Suite 300

City:

Reston

State:

VA

Country:

USA

Zipcode:

20191

Attention:

 $Rodrigo\ Gomez$

2. Contact				
	Name:	Karis Hastings	Phone Number:	202-599-0975
	Company:	SatCom Law LLC	Fax Number:	
	Street:	1317 F Street NW, Suite 400	E-Mail:	karis@satcomlaw.com
	City:	Washington	State:	DC
	Country:	USA	Zipcode:	20004 –

Relationship:

Legal Counsel

RENEWAL INFORMATION

Attention:

Karis Hastings

3. Rulepart under which this filing is made Rulepart 25

4.]	4. Is a fee submitted with this application?				
0	If Yes, complete and attach	FCC Form 159.	If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).		
0	Governmental Entity	Noncommercia	al educational licensee		
0	Other(please explain):				

5. Application is for renewal of license in exact conformity with the existing license as specified below:	
(a)File Number SESMOD2017092001041	(b)Date Issued 2017–11–30 00:00:00.0
(c)Call Sign E050252	(d)Location Suitland, MD
(e)Nature of Service Fixed Satellite Service	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)

(g)Expiration Date 2020–10–19 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:	type of emission or of a transmitter which have been made since the l	ast		
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? Yes No N/A			
If YES when:				
(b) If this is a Multipoint Distribution Service (MDS) station, is there a c with, or leasing arrangement with a cable television company?	ownership interest in control by, affiliation Yes No N/A			
8. Applicant represents that there has been no change in applicant's orga applicant's relation to the station, or financial responsibility; that application identified below, is to be considered as a part of this application, and the here any further exceptions, not already covered in question 6 or 7. File Number SES-T/C-20090724-00916Date 07/24/2009	ants most recent application or report embodying this information, as	e		

9. Would a Commision grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact?	000	Yes No N/A
If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311: If NO, Explain briefly why not:		
10. Certification: The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial of federal 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. g., corporation, partnership or other unincorporated association), no party to the application is subject to denial of federal benefits pusuant to that section. For the definition of a "party" for these purposes, see 47 CFR 1.2002(b).	⊗	Yes No
a. Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests a station license in accordance with this application. Applicant acknowledges that all attached exhibits are a material part hereof. b. The undersigned, individually and for the applicant, hereby certifies that the statements made in this application are true, complete and correct to the best of the signer's knowledge and belief, and are made in good faith.		
11. Designate Appropriate Classification:		
 Individual Unincorporated Association Partnership Corporation Governmental Entity Other (please specify) 		

12. Please supply any need attachments.

1:	2:		3:	
CERTIFICATION				
13. Typed Name of Person Signing Rodrigo Gomez 14. Title of Person Signing Vice President, Engineering			·	
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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