APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: TEMP AUTH HAWLEY

1. Appl	icant
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Name: Loral SpaceCom Corporation Phone Number: 908–470–2342

(Debtor-in-Possession)

DBA Name: Fax Number: 908–470–2453

Street: 500 Hills Drive E–Mail: se@loralskynet.com

P.O Box 7018

City: Bedminster State: NJ

Country: USA **Zipcode:** 07921 -7018

Attention: Mr Stanley Edinger

2. Contact				
Name:	STANLEY EDINGER	Phone Number:	908-470-2342	
Company:	Loral Skynet	Fax Number:	908-470-2453	
Street:	500 Hills Drive	E–Mail:	se@loralskynet.com	
	P.O Box 7018			
City:	Bedminster	State:	NJ	
Country:	USA	Zipcode:	07921 -7018	
Contact Title:	MANAGER GOVERNMENT AFFAIRS	Relationship:	Same	
3. Reference File Numb	per d with this application?			
	d attach FCC Form 159. If No, inc	dicate reason for fee exemption	on (see 47 C.F.R.Section 1.1114).	
_	ty Noncommercial educationa			
Other(please explai	-			
4b. Fee Classification	CGX – Fixed Satellite Transmit/Re	eceive Earth Station		
5. Type Request				
Use Prior to Grant	O Chang	ge Station Location	O Other	
6. Requested Use Prior 11/06/2003	Date			
7. CityHawley		8. Latitude (dd mm ss.s h)	41 27 51.0 N	

9. State PA	10. Longitude (dd mm ss.s h) 75 7 48.0 W		
11. Please supply any need attachments.			
Attachment 1: A Attachment 2: c	Attachment 3: B		
12. 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.)			
Temporary Authority is required for 180 days for demonstrating to a customer the capability of Loral to provide quality communications over Satellite from the Hawley, PA location. The permanent application will be filed by the customer, not Loral.			
13. 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.			
14. Name of Person Signing STANLEY EDINGER	15. Title of Person Signing MANAGER GOVERNMENT AFFAIRS		
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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