

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
STA for GKA1, GKA2, GKA3 for 3/21/05 to 5/21/05

**1. Applicant**

<b>Name:</b>	EchoStar Satellite L.L.C.	<b>Phone Number:</b>	303-723-1000
<b>DBA Name:</b>		<b>Fax Number:</b>	303-723-1699
<b>Street:</b>	9601 South Meridian Blvd.	<b>E-Mail:</b>	
<b>City:</b>	Englewood	<b>State:</b>	CO
<b>Country:</b>	USA	<b>Zipcode:</b>	80112 -
<b>Attention:</b>	David K Moskowitz		

**2. Contact**

<b>Name:</b>	Pantelis Michalopoulos	<b>Phone Number:</b>	202-429-6494
<b>Company:</b>	Steptoe & Johnson LLP	<b>Fax Number:</b>	202-429-6494
<b>Street:</b>	1330 Connecticut Ave., NW	<b>E-Mail:</b>	pmichalo@steptoe.com
<b>City:</b>	Washington	<b>State:</b>	DC
<b>Country:</b>	USA	<b>Zipcode:</b>	20036 -1795
<b>Contact Title:</b>		<b>Relationship:</b>	Legal Counsel

**3. Reference File Number**

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    CGX – Fixed Satellite Transmit/Receive Earth Station

**5. Type Request**

- Use Prior to Grant                       Change Station Location                       Other

6. Requested Use Prior Date  
03/21/2005

7. City Gilbert

8. Latitude  
(dd mm ss.s h) 33 21 55.6 N

9. State AZ	10. Longitude (dd mm ss.s h) 111 48 49.1 W
11. Please supply any need attachments. Attachment 1: Narrative                      Attachment 2: Freq. Coordination                      Attachment 3: Rad. Hazard	
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.) <div style="border: 1px solid black; padding: 5px; margin: 10px 0;">This is an application for special temporary authority to operate three Ka-band antennas located in Gilbert, Arizona in conjunction with AMC-15 at 113W, AMC-16 at 85W and 97W, and EchoStar 9 for the period 3/21/05 to 5/21/05.</div>	
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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing David K. Moskowitz	15. Title of Person Signing Executive Vice President and General Counsel
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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