APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: E980250 Kapolei STA extend 5850–5925 MHz 6/28/2005

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1.	A	pp	HC	ant

Name: Loral Skynet Network Services, **Phone Number:** 908–470–2342

Inc. (Debtor-in-Possession)

DBA Name: Fax Number: 908–470–2453

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

PO Box 7018

City: Bedminster State: NJ

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

Attention: Mr Stanley Edinger

2. Contact				
Name:	Mr Stanley Edinger	Phone Number:	908-470-2342	
Company:	Loral Skynet	Fax Number:	908-470-2453	
Street:	500 Hills Drive	E-Mail:	se@loralskynet.com	
	PO Box 7018			
City:	Bedminster	State:	NJ	
Country:	USA	Zipcode:	07921 -7018	
Attention:	MANAGER GOVERNMENT RELATIONS	Relationship:	Same	
4a. Is a fee submitted	er SESSTA2005042800510 I with this application?			
If Yes, complete and	l attach FCC Form 159. If No, inc	dicate reason for fee exempti	ion (see 47 C.F.R.Section 1.1114).	
	y Noncommercial educationa	al licensee		
Other(please explain	1):			
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 I 07/27/2005	Date			
7. CityKAPOLEI		8. Latitude (dd mm ss.s h)	8. Latitude (dd mm ss.s h) 21 20 12.6 N	

9. State HI

(dd mm ss.s h) 158 5 21.1 W

10. Longitude

11. Please supply any need attachments.

Attachment 1: A Attachment 2: B Attachment 3:

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.)

Request to extend Special Temporary Authority Granted on May 28, 2005 File No. SES-STA-20050428-00510, for a period of 60 days.

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.

Yes No

14. Name of Person Signing STANLEY EDINGER

15. Title of Person Signing
MANAGER GOVERNMENT RELATIONS

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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