APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 30 Day STA for New Braunfels, Texas DBS Earth Stations

Name:	EchoStar Satellite Operating	Phone Number:	303-723-1000

DBA Name: Fax Number: 303–723–1699

Street: 9601 South Meridian Boulevard E–Mail:

City: Englewood State: CO

Country: USA Zipcode: 80112 -

Attention: David K Moskowitz

Corporation

1. Applicant

2. Contact						
	Name:	Pantelis Michalopoulos	Phone Numb	nber: 202–429–6494		
	Company:	Steptoe & Johnson LLP	Fax Number:	er: 202–429–3902		
	Street:	1330 Connecticut Ave., NW	E–Mail:	pmichalo@steptoe.com		
	City:	Washington	State:	DC		
	Country:	USA	Zipcode:	20036 -1795		
	Attention:		Relationship:	p: Legal Counsel		
(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.) 3. Reference File Number or Submission ID						
		with this application? I attach FCC Form 159. If No. in	ndicate reason for t	or fee exemption (see 47 C.F.R.Section 1.1114).		
 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. Reques	ted Use Prior I	Date				
1			8. Latitude (dd mm ss.s h) 29 45 35.8 N			

9. State TX	10. Longitude (dd mm ss.s h) 98 3 48.1 W			
11.79	(dd filli 55.5 fl) 76 5 40.1 W			
11. Please supply any need attachments.				
Attachment 1: Narrative Attachment 2: Freq. Co	pordination 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.)				
This is an application for a 30 day STA to operate two new 13.2m DBS antennas located in				
New Braunfels, Texas.				
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	15. Title of Person Signing			
David K. Moskowitz	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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