

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for 13 meter Ka-band ES @ N. Las Vegas

1. Applicant

Name:	HNS License Sub, LLC	Phone Number:	301-428-5506
DBA Name:		Fax Number:	301-428-2802
Street:	11717 Exploration Lane	E-Mail:	sdoiron@hns.com
City:	Germantown	State:	MD
Country:	USA	Zipcode:	20876 -
Attention:	Mr Steven Doiron		

2. Contact

Name:	Stephen D. Baruch	Phone Number:	202-416-6782
Company:	Leventhal Senter & Lerman PLLC	Fax Number:	202-429-4626
Street:	2000 K Street, N.W. Suite 600	E-Mail:	sbaruch@lsl-law.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20006 -
Attention:		Relationship:	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

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

04/20/2007

7. City North Las Vegas

8. Latitude

(dd mm ss.s h) 36 14 11.0 N

9. State NV	10. Longitude (dd mm ss.s h) 115 7 4.0 W
11. Please supply any need attachments. Attachment 1: Exhibit A Attachment 2: Exhibit B Attachment 3: Exhibit C	
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;">Hughes requests temporary authority to operate a 13 meter Vertex RSI Ka-band antenna for testing, gain measurements, and antenna performance data generation during a 30-day period commencing April 20, 2007.</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 Steven Doiron	15. Title of Person Signing Senior Director, Regulatory 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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