## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Request to Renew Special Temporary Authority to Operate E980118 to Move EchoStar 1 to 77.15 W.L.

1. Applicant

Name: EchoStar Corporation Phone Number: 303–723–1000

DBA Name: Fax Number:

**Street:** 100 Inverness Terrace East **E-Mail:** 

City: Englewood State: CO

Country: USA Zipcode: 80112 -

**Attention:** Linda Kinney – (202)293–0981

2. Conta	ct				
	Name:	Pantelis Michalopoulos	Phone Number:	202-429-6494	
	Company:	Steptoe & Johnson LLP	Fax Number:		
	Street:	1330 Connecticut Ave, NW	E–Mail:	pmichalopoulos@steptoe.com	
	City:	Washington	State:	DC	
	Country:	USA	Zipcode:	20036 –	
	Attention:		Relationship:	Legal Counsel	
(If your a	application is re	elated to an application filed with t	he Commission, enter either	the file number or the IB Submission ID of the related	
application	on. Please enter	* *	,		
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).      Covernmental Entity:    Noncommercial educational licenses.					
Ofther(please explain):  One of the often of					
4b. Fee C	Classification	CGX – Fixed Satellite Transmit/F	Receive Earth Station		
5. Type R	Request				
O Use Prior to Grant O Change Station Location O Other					
6. Reques	sted Use Prior	Date			
7. CityCl	neyenne		8. Latitude (dd mm ss.s h	) 41 7 55.7 N	

9. State WY	10. Longitude (dd mm ss.s h) 104 44 11.5 W					
11. Please supply any need attachments.						
Attachment 1: Narrative Attachment 2:	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.)						
EchoStar Corporation seeks to renew for 60 days its STA to operate its transmit/receive earth station to move the EchoStar 1 satellite from 148 W.L. to 77.15 W.L. where it will operate as a Mexican-licensed satellite. Please see the attached narrative.						
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 Linda Kinney	15. Title of Person Signing Vice President, Law and Regulation					
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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