

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

Request to Renew Special Temporary Authority to Operate E080058 to Provide Feeder Link Services to EchoStar 1 at 77 W.L.

**1. Applicant**

<b>Name:</b>	EchoStar Corporation	<b>Phone Number:</b>	303-723-1000
<b>DBA Name:</b>		<b>Fax Number:</b>	
<b>Street:</b>	100 Inverness Terrace East	<b>E-Mail:</b>	
<b>City:</b>	Englewood	<b>State:</b>	CO
<b>Country:</b>	USA	<b>Zipcode:</b>	80112 -
<b>Attention:</b>	Linda Kinney - (202)293-0981		

<b>2. Contact</b>	
<b>Name:</b> Pantelis Michalopoulos	<b>Phone Number:</b> 202-429-6494
<b>Company:</b> Steptoe & Johnson LLP	<b>Fax Number:</b>
<b>Street:</b> 1330 Connecticut Ave. NW	<b>E-Mail:</b> pmichalopoulos@steptoe.com
<b>City:</b> Washington	<b>State:</b> DC
<b>Country:</b> USA	<b>Zipcode:</b> 20036 -
<b>Attention:</b>	<b>Relationship:</b> 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 SESSTA2009013000115 or Submission ID	
4a. Is a fee submitted with this application?	
<input checked="" type="radio"/> 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	
<input type="radio"/> Other(please explain):	
4b. Fee Classification    CGX – Fixed Satellite Transmit/Receive Earth Station	
5. Type Request	
Use Prior to Grant <input type="radio"/> Change Station Location <input checked="" type="radio"/> Other	
6. Requested Use Prior Date	
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:                                  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.) <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> EchoStar Corporation seeks to renew its STA to operate its transmit/receive earth station to provide DBS feeder link services to the EchoStar 1 satellite at 77 W.L. pending the re-flagging of the satellite under Mexican authority. Please see the attached narrative. </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. <div style="text-align: right; margin-top: 10px;"> <input checked="" type="radio"/> Yes                  <input type="radio"/> No </div>	
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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