## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Request for STA to use E980076 to provide service to Afsat

1. Applicant

Name: SES Americom, Inc. Phone Number: 202–478–7137

**DBA Name:** Fax Number: 202–478–7101

Street: 2001 L Street, NW E-Mail: daniel.mah@ses.com

Suite 800

City: Washington State: DC

Country: USA Zipcode: 20036 -

**Attention:** Daniel C.H. Mah

2. Contac	t					
	Name:	Brian Weimer	Phone Number:	202-469-4904		
	Company:	Sheppard Mullin	Fax Number:	202-312-9446		
	Street:	1300 I Street, NW	E–Mail:	bweimer@sheppardmullin.com		
	City:	Washington	State:	DC		
	Country:	USA	Zipcode:	20005 -3314		
	•	USA	-			
	Attention:		Relationship:	Legal Counsel		
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  O Use Prior to Grant  O Change Station Location  O Other						
	ted Use Prior I	Date				
7. CityBri	stow		8. Latitud (dd mm s			

9. State VA	10. Longitude (dd mm ss.s h) 77 34 23.0 W					
11. Please supply any need attachments.						
Attachment 1: STA request re Afsat 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.)						
Request for STA to use E980076 to provide ser	vice to Afsat					
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 Daniel C.H. Mah	15. Title of Person Signing Regulatory 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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