

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
NWUF KA4 STA

1. Applicant

Name:	DIRECTV Enterprises, LLC	Phone Number:	301-663-0053
DBA Name:		Fax Number:	240-358-0569
Street:	2230 E. Imperial Hwy	E-Mail:	jwengryniuk@directv.com
City:	El Segundo	State:	CA
Country:	USA	Zipcode:	90245 -
Attention:	Jack Wengryniuk		

2. Contact

Name:	William M. Wiltshire	Phone Number:	202-730-1350
Company:	Wiltshire & Grannis LLP	Fax Number:	202-730-1301
Street:	1200 18th Street, NW	E-Mail:	wwiltshire@wiltshiregrannis.com
	12th Fl		
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 -
Attention:	William M. Wiltshire	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 SESLIC2010102901373 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
01/31/2011

7. CityMoxee	8. Latitude (dd mm ss.s h) 46 33 55.1 N
9. State WA	10. Longitude (dd mm ss.s h) 120 23 56.8 W
11. Please supply any need attachments. Attachment 1: STA Request 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: 10px; margin: 10px 0;"> <p>DIRECTV Enterprises, LLC hereby requests Special Temporary Authority for up to 60 days beginning to conduct on-site testing of the Ka-band earth station recently installed at the DIRECTV Moxee, Washington location, while its license application is being processed.</p> </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 James Butterworth	15. Title of Person Signing Senior Vice President
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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