

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
E040204 30-Day STA Request to permit testing of XM-1 and XM-2

1. Applicant

Name:	XM Radio LLC	Phone Number:	202-380-4000
DBA Name:		Fax Number:	202-380-4500
Street:	1221 Avenue of the Americas 36th Floor	E-Mail:	James.Blitz@siriusxm.com
City:	New York	State:	NY
Country:	USA	Zipcode:	10020 -
Attention:	James S. Blitz		

2. Contact

Name:	Karis A. Hastings	Phone Number:	202-599-0975
Company:	SatCom Law LLC	Fax Number:	
Street:	1317 F St. N.W., Suite 400	E-Mail:	karis@satcomlaw.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20004 -1109
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

7. City Ellenwood

8. Latitude
(dd mm ss.s h) 33 39 51.0 N

9. State GA	10. Longitude (dd mm ss.s h) 84 16 24.0 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: 5px; margin: 10px 0;">XM Radio LLC requests special temporary authority for 30 days commencing November 7 for its Ellenwood, Georgia earth station (E040204) to communicate with the XM-1 (S2118) and XM-2 (S2119) spacecraft to test their performance.</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 S. Blitz	15. Title of Person Signing Vice President, 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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