## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: October 2011 Request for Special Temporary Authority for Gateway Stations

1. Applicant

Name: HNS License Sub, LLC **Phone Number:** 301–428–5506

**DBA Name:** Fax Number: 301–428–2802

Street: 11717 Exploration Lane E-Mail: Steven.Doiron@hughes.com

City: Germantown State: MD

Country: USA Zipcode: 20876 -

**Attention:** Mr. Steven Doiron

2. Contact				
Name:	Stephen D. Baruch	Phone Number:	202-416-6782	
Company:	Lerman Senter PLLC	Fax Number:	202–293–7783	
Street:	2000 K Street, N.W.	E–Mail:	sbaruch@lermansenter.com	
	Suite 600			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20006 –	
Attention:	Stephen D. Baruch	Relationship:	Legal Counsel	
application. Please ente 3. Reference File Num 4a. Is a fee submitted If Yes, complete and Governmental Entit Other(please explain	r only one.) ber SESLIC2011102101243 of the distribution of the di	or Submission ID o, indicate reason for fee exemptional licensee	on (see 47 C.F.R.Section 1.1114).	
	CGX – Fixed Satellite Transm	nt/Receive Earth Station		
5. Type Request  O Use Prior to Grant  O Change Station Location  O Other				
6. Requested Use Prior 11/01/2011	Date			
7. City		8. Latitude (dd mm ss.s h)	0 0 0.0 N	

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0 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.)  See 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 Steven Doiron	15. Title of Person Signing Senior Director, Regulatory Affairs			
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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