APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: EchoStar STA Renewal for E080120

1. Applicant						
Nam		EchoStar Broadcasting Corporation	Phone Number:	(301) 428–5893		
DBA Name:			Fax Number:			
Stree	et:	100 Inverness Terrace East	E-Mail:	Jennifer.Manner@echostar.com		
City:	:]	Englewood	State:	СО		
Cour	ntry:	USA	Zipcode:	80112 –		
Atte	ntion:	Jennifer Manner				

2. Contact						
Name:	Phuong Pham	Phone Numbe	r: 202–383–3395			
Company:	Wilkinson Barker Knauer, LLP	Fax Number:	202-783-5851			
Street:	2300 N Street, NW	E–Mail:	PPham@wbklaw.com			
	Suite 700					
City:	Washington	State:	DC			
Country:	USA	Zipcode:	20037 –			
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 SESSTA2013111300977 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. CityCheyenne			ntitude nm ss.s h) 41 7 54.4 N			

9. State WY	10. Longitude (dd mm ss.s h) 104 44 13.0 W					
11. Please supply any need attachments.						
Attachment 1: Exhibit 1Attachment 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.)						
EchoStar Broadcasting Corporation requests renewal of special temporary authority until March 28, 2014 for earth station communications with EchoStar 6 at 96.2 W.L. 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 Jennifer Manner	15. Title of Person Signing Vice President of 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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