

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
E010241 STA for EchoStar 18

**1. Applicant**

<b>Name:</b>	EchoStar Broadcasting Corporation	<b>Phone Number:</b>	301-428-5893
<b>DBA Name:</b>		<b>Fax Number:</b>	
<b>Street:</b>	100 Inverness Terrace East	<b>E-Mail:</b>	
<b>City:</b>	Englewood	<b>State:</b>	CO
<b>Country:</b>	USA	<b>Zipcode:</b>	80112 -
<b>Attention:</b>	Jennifer A Manner		

**2. Contact**

<b>Name:</b>	Jennifer A. Manner	<b>Phone Number:</b>	301-428-5893
<b>Company:</b>	EchoStar Broadcasting Corporation	<b>Fax Number:</b>	
<b>Street:</b>	11717 Exploration Lane	<b>E-Mail:</b>	
<b>City:</b>	Germantown	<b>State:</b>	MD
<b>Country:</b>	USA	<b>Zipcode:</b>	20876 -
<b>Attention:</b>		<b>Relationship:</b>	Same

(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



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