

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA Request to Add TT&C Emission Designators for Call Sign E050255 Prior to Grant

1. Applicant

| | | | |
|-------------------|------------------------------------|----------------------|-------------------------|
| Name: | DIRECTV Enterprises, LLC | Phone Number: | 202-457-3032 |
| DBA Name: | | Fax Number: | |
| Street: | 1120 20th Street, NW Suite 1000 | E-Mail: | jackie.flemming@att.com |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 - |
| Attention: | Jacquelyne Flemming | | |

2. Contact

| | | | |
|-------------------|--------------------|----------------------|-----------------------|
| Name: | Jennifer D. Hindin | Phone Number: | 202-719-4975 |
| Company: | Wiley Rein LLP | Fax Number: | 202-719-7049 |
| Street: | 1776 K Street, NW | E-Mail: | jhindin@wileyrein.com |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20006 - |
| 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 SESMOD2017100901116 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

10/31/2017

7. City Long Beach

8. Latitude

(dd mm ss.s h) 33 49 44.4 N

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