APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: extension of 60–day STA for E950499

1. Applicant			
Name:	DG Consents Sub, Inc.	Phone Number:	303-682-1390
DBA Name:		Fax Number:	303-684-1390
Street:	1300 W. 120th Avenue	E-Mail:	libby.smith@digitalglobe.com
City:	Westminster	State:	CO
Country:	USA	Zipcode:	80234 –
Attention:	Ms Libby Smith		

2. Contact						
Name:	Henry Gola	Phone Number:	2027197561			
Company:	Wiley Rein LLP	Fax Number:				
Street:	1776 K St NW	E–Mail:	hgola@wileyrein.com			
City:	Washington	State:	DC			
Country:	USA	Zipcode:	20006 –			
Attention:		Relationship:	Legal Counsel			
		ith the Commission, enter either the	e 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 O Noncommercial educational licensee						
O Other(please explain):						
	4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station					
5. Type Request						
Use Prior to Grant O Change Station Location O Other						
	00	change Station Location	O one			
6. Requested Use Prior	Date					
7. CityFairbanks		8. Latitude (dd mm ss.s h)	64 53 26.0 N			

9. State AK	10. Longitude (dd mm ss.s h) 147 31 44.0 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.)					
Licensee requests STA extension for 60 days while MOD to add an antenna to earth station E9540499 is pending.					
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 Libby J. Smith	15. Title of Person Signing Technology Control Officer				
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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