## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Summerset (E150098) STA for EchoStar 23

1. Applicant								
]	Name:	EchoStar Operating L.L.C.	Phone Number:	301-428-5893				
]	DBA Name:		Fax Number:					
:	Street:	100 Inverness Terrace East	E-Mail:	jennifer.manner@echostar.com				
	City:	Englewood	State:	СО				
	<b>Country:</b>	USA	Zipcode:	80112 –				
	Attention:	Jennifer Manner						

2. Contact							
Name:	Jennifer A. Manner	Phone N	umber:	301-428-5893			
Compa	my: EchoStar Operating I	L.L.C. Fax Num	ıber:				
Street:	11717 Exploration La	ane E–Mail:		jennifer.manner@echostar.ccom			
City:	Germantown	State:		MD			
Count	y: USA	Zipcode:		20876 –			
Attent	on:	Relations	ship:	Same			
<ul> <li>(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.)</li> <li>3. Reference File Number or Submission ID IB2019000353</li> <li>4a. Is a fee submitted with this application?</li> <li>If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).</li> <li>Governmental Entity Noncommercial educational licensee</li> <li>Other(please explain):</li> </ul>							
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station							
5. Type Request         • Use Prior to Grant         • Change Station Location         • Other							
6. Requested Use 1 03/15/2019	Prior Date						

7. CitySummerset	8. Latitude (dd mm ss.s h) 44 11 14.4 N						
9. State SD	10. Longitude (dd mm ss.s h) 103 20 9.6 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.)							
Seeking special temporary authority to operate earth station for TT&C and feeder link communications with the EchoStar 23 satellite during its relocation to, and operations at, 72.6 W.L. See Exhibit 1.							
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 A. Manner	15. Title of Person Signing Senior Vice President, 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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