## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA Extension Request for Vernon, UT Gateway 11/15/2021

1. Applicant

Name: SpaceX Services, Inc. Phone Number: 202–649–2700

DBA Name: Fax Number:

Street: 1155 F Street, N.W. E-Mail: david.goldman@spacex.com

City: Washington State: DC

Country: USA Zipcode: 20004 -

**Attention:** Mr David Goldman

2. Contact					
	Name:	SpaceX Services, Inc.	Phone Number:	202-649-2541	
	Company:		Fax Number:		
	Street:	1155 F Street, N.W.	E–Mail:	david.goldman@spacex.com	
	C'A	W/s-12 materia	54-4	DC.	
	City:	Washington	State:	DC	
	<b>Country:</b>	USA	Zipcode:	20004 –	
	<b>Attention:</b>		Relationship:		
(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 SESLIC2020070900735 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  O Use Prior to Grant  O Change Station Location  O Other					
6. Reques	ted Use Prior I	Date			
7. CityVer	rnon		8. Latit (dd mn	tude m ss.s h) 40 4 34.4 N	

9. State UT	10. Longitude					
	(dd mm ss.s h) 112 21 17.0 W					
11. Please supply any need attachments.						
Attachment 1: Vernon, UT STA Exten 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.)						
SpaceX Services seeks Special Temporary Authority to operate earth stations to communicate						
with its NGSO constellation.						
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	15. Title of Person Signing					
David Goldman	Director, Satellite Policy					
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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