

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

E980005 – Feb22 30 Day STA Renewal

1. Applicant

Name:	EchoStar BSS Corporation	Phone Number:	202-463-3709
DBA Name:		Fax Number:	
Street:	1110 Vermont Ave NW Suite 750	E-Mail:	Alison.Minea@dish.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20005 –
Attention:	Alison Minea		

2. Contact	
Name:	EchoStar BSS Corporation
Company:	
Street:	1110 Vermont Ave NW Suite 750
City:	Washington
Country:	USA
Attention:	
Phone Number:	202-463-3709
Fax Number:	
E-Mail:	Alison.Minea@dish.com
State:	DC
Zipcode:	20005 -
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 SESSTA2022010700024 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 02/07/2022	
7. CityCheyenne	8. Latitude (dd mm ss.s h) 41 7 56.4 N

9. State WY	10. Longitude (dd mm ss.s h) 104 44 10.4 W
11. Please supply any need attachments. Attachment 1: Exhibit 1 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 renewal of 30&#8722;day special temporary authority to operate earth station for TT&C communications with the EchoStar 23 satellite for interim operations at 67.9 W.L. prior to its planned relocation and operations at 109.9 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. Yes No	
14. Name of Person Signing Alison Minea	15. Title of Person Signing Vice President & Associate General Counsel
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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