

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

LOFT Yam-3 UHF Extension2

1. Applicant

Name:	ATLAS Space Operations, Inc	Phone Number:	231-598-6184 x103
DBA Name:		Fax Number:	
Street:	10850 E Traverse Hwy Ste 3355	E-Mail:	hpritchard@atlasground.com
City:	Traverse City	State:	MI
Country:	USA	Zipcode:	49684 -
Attention:	Ms Hanna R Pritchard		

2. Contact	
Name: Hanna Pritchard Company: ATLAS Space Operations, Inc Street: 10850 E Traverse Hwy Ste 3355 City: Traverse City Country: USA Attention: Hanna Pritchard	Phone Number: 231-598-6184 x103 Fax Number: E-Mail: hpritchard@atlasground.com State: MI Zipcode: 49684 - Relationship: Same
(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 SESMOD2022072200792 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 10/04/2022	
7. CityDededo	8. Latitude (dd mm ss.s h) 13 30 48.8 N

9. State GU	10. Longitude (dd mm ss.s h) 144 49 31.1 E
11. Please supply any need attachments. Attachment 1: Public Interest LOFT 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.) ATLAS Space Operations respectfully requests a 60 day extension of special temporary authorization for TT&C operations with YAM-3 S3072. Extension is sought pending action on ATLAS' modification application seeking regular authority for the spacecraft, file number ses-mod-20220722-00792.	
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 Hanna Pritchard	15. Title of Person Signing Orbit Analyst
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