

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

STA Request for Roberts, WI Gateway | After AMD | 02/29/2023

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. Company: Street: 22908 NE Alder Crest Dr City: Redmond Country: USA Attention: David Liptsyn	Phone Number: 973-856-1385 Fax Number: E-Mail: david.liptsyn@spacex.com State: WA Zipcode: 98053 - 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 or Submission ID IB2023000691	
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 03/03/2023	
7. City Roberts	8. Latitude (dd mm ss.s h) 44 56 27.7 N

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