## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Amend Pending STA Request by submitting Revised NTIA Transmittal form

1. Applicant

Name: Space Imaging LLC Phone Number: 303–254–2151

**DBA Name:** Fax Number: 303–254–2214

Street: 12076 Grant Street E–Mail: ssmith@spaceimaging.com

City: Thornton State: CO

**Country:** USA **Zipcode:** 80241 -3102

**Attention:** Mr Scott Smith

| 2. Contact                       |  |                               |   |  |
|----------------------------------|--|-------------------------------|---|--|
| Name:                            | Raymond G. Bender, Jr.   | Phone Number:                 | 202-776-2758                            |  |
| Company                          | Dow, Lohnes & Albertson, pllc                                  | Fax Number:                   | 202-776-2222                            |  |
| Street:                          | 1200 New Hampshire Ave, N.W.                                   | E–Mail:                       | RBender@dlalaw.com                      |  |
| City:                            | Washington   | State:                        | DC                                      |  |
| Country:                         | USA  | Zipcode:                      | 20036 -6802                             |  |
| Contact<br>Title:                | Attorney   | Relationship:                 | Legal Counsel                           |  |
|                                  | mber SESLIC1996070300903                                       |                               |   |  |
|                                  | ted with this application? and attach FCC Form 159. If No, ind | icate reason for fee exempti  | ion (see 47 C F.R. Section 1 1114)      |  |
| <del></del>                      | ntity Noncommercial educational                                |                               |   |  |
| Other(please exp                 | _  |                               |   |  |
| 4b. Fee Classification           | CGX – Fixed Satellite Transmit/Red                             | ceive Earth Station           |   |  |
| 5. Type Request                  |  |                               |   |  |
| Use Prior to Gra                 | nt Change  | e Station Location            | Other                                   |  |
| 6. Requested Use Prio 06/22/2004 | or Date  |                               |   |  |
| 7. CityNorman                    |  | 8. Latitude<br>(dd mm ss.s h) | 8. Latitude (dd mm ss.s h) 35 10 47.2 N |  |

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|--|---|--|--|--|--|
| 9. State OK  | 10. Longitude   |  |  |  |  |
|  | (dd mm ss.s h) 97 33 59.3 W                                       |  |  |  |  |
| 11. Please supply any need attachments.  |   |  |  |  |  |
| Attachment 1: STA Exhibit Attachment 2: Revised  | NTIA Attachment 3:  |  |  |  |  |
|  |   |  |  |  |  |
| 12. Description. (If the complete description does not appear in this bo   | ox, please go to the end of the form to view it in its entirety.) |  |  |  |  |
| This STA revises an STA application filed on June 7, 2004 to correct technical information   |   |  |  |  |  |
| provided in the NTIA Transmittal form. A Revised NTIA Transmittal is furnished herewith.   |   |  |  |  |  |
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|  |   |  |  |  |  |
|  |   |  |  |  |  |
| 13. By checking Yes, the undersigned certifies that neither applicant nor  | r any other party to the application is                           |  |  |  |  |
| 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                                       |  |  |  |  |
| Scott Smith  | Executive Vice President, Satellite Access Systems                |  |  |  |  |
| 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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