## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 60–Day Earth Station STA Request to Add Three New Satellite Points of Communication to Call Sign E930229

1. Applicant

Name: DIRECTV Enterprises, LLC **Phone Number:** 310–964–3589

DBA Name: Fax Number:

Street: 1120 20th Street, NW E-Mail: nm704u@att.com

Suite 1000

City: Washington State: DC

Country: USA Zipcode: 20036 -

**Attention:** Navid Motamed

| 2. Contact                                                                  |                            |                                       |           |                            |                                  |  |
|-----------------------------------------------------------------------------|----------------------------|---------------------------------------|-----------|----------------------------|----------------------------------|--|
| Na                                                                          | me:                        | Jennifer D. Hindin                    | Phone Nu  | ımber:                     | 202-719-4975                     |  |
| Co                                                                          | mpany:                     | Wiley Rein LLP                        | Fax Num   | ber:                       | 202-719-7049                     |  |
| Str                                                                         | reet:                      | 1776 K Street, NW                     | E–Mail:   |                            | jhindin@wileyrein.com            |  |
| Cit                                                                         | y:                         | Washington                            | State:    |                            | DC                               |  |
| Co                                                                          | untry:                     | USA                                   | Zipcode:  |                            | 20006 –                          |  |
| Att                                                                         | tention:                   |                                       | Relations | ship:                      | Legal Counsel                    |  |
| If Yes, con                                                                 | nplete and<br>ental Entity | <ul> <li>Noncommercial edu</li> </ul> |           | for fee exemption          | n (see 47 C.F.R.Section 1.1114). |  |
| 4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station |                            |                                       |           |                            |                                  |  |
| 5. Type Reque                                                               | st                         |                                       |           |                            |                                  |  |
| Use Prior to Grant Change Station Location Other                            |                            |                                       |           |                            |                                  |  |
| 6. Requested U                                                              | Jse Prior D                | ate                                   |           |                            |                                  |  |
| 7. CityEllenwo                                                              | ood                        |                                       |           | 8. Latitude (dd mm ss.s h) | 33 39 50.0 N                     |  |

| 9. State GA                                                                                                                                                                                                                                                                                                                                                                                                                               | 10. Longitude (dd mm ss.s h) 84 16 24.0 W                                      |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--|--|--|--|--|--|
| 11. Please supply any need attachments.                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                |  |  |  |  |  |  |
| Attachment 1: Narrative 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.)                                                                                                                                                                                                                                                                                                  |                                                                                |  |  |  |  |  |  |
| DIRECTV Enterprises, LLC requests a grant of special temporary authority for 60 days to add its T8 (Call Sign S2632), T15 (Call Sign S2930), and T9S (Call Sign S2669) satellites as points of communication to its Ellenwood, Georgia earth station authorization (Call Sign E930229).                                                                                                                                                   |                                                                                |  |  |  |  |  |  |
| 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 Navid Motamed                                                                                                                                                                                                                                                                                                                                                                                                  | 15. Title of Person Signing Asst. Vice President Satellite Systems Engineering |  |  |  |  |  |  |
| 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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