

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
30-Day STA Request to Operate CRBC to Deorbit T4S

1. Applicant

Name:	DIRECTV Enterprises, LLC	Phone Number:	310-964-4996
DBA Name:		Fax Number:	
Street:	1120 20th Street, NW Suite 1000	E-Mail:	spdulac@att.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 -
Attention:	Steve Dulac		

2. Contact

Name:	Daniel Brooks	Phone Number:	202-719-4183
Company:	Wiley Rein LLP	Fax Number:	202-719-7049
Street:	1776 K Street, NW	E-Mail:	dbrooks@wileyrein.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20006 -
Attention:		Relationship:	Legal Counsel

(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

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

7. City Castle Rock

8. Latitude
(dd mm ss.s h) 39 16 38.1 N

9. State CO	10. Longitude (dd mm ss.s h) 104 48 29.5 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.) <div style="border: 1px solid black; padding: 5px; margin: 5px auto; width: 80%; text-align: center;"> DIRECTV Enterprises, LLC requests a grant of special temporary authority for 30 days commencing September 10, 2019 to operate its Castle Rock, Colorado earth station (Call Sign E930304) to deorbit its T4S satellite (Call Sign S2430). </div>	
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. <div style="text-align: right; margin-right: 20px;"> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>	
14. Name of Person Signing Steve Dulac	15. Title of Person Signing Director, Content Technology & Regulatory Policy
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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