APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA Extension – Lunenburg, VT – Filed 8/06/2021

1. Applicant							
	Name:	SpaceX Services, Inc.	Phone Number:	2026492641			
	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.	Phone Number:	2026492641				
Company:		Fax Number:					
Street:	1155 F Street, N.W.	E–Mail:	david.goldman@spacex.com				
City:	Washington	State:	DC				
Country:	USA	Zipcode:	20004 –				
Attention:		Relationship:					
(If your application is r	related to an application filed wi	th the Commission, enter either th	e file number or the IB Submission ID of the related				
application. Please ente	er only one.)						
3. Reference File Number SESLIC2021032200572 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 O Change Station Location O Other							
6. Requested Use Prior	Date						
08/14/2021							
7. CityLunenburg		8. Latitude					
		(dd mm ss.s h)	44 24 43.3 N				

9. State VT	10. Longitude (dd mm ss.s h) 71 43 54.6 W						
11. Please supply any need attachments.							
Attachment 1: Lunenburg, VT STA Rq 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.)							
SpaceX Services seeks Special Temporary Authority to operate earth stations to communicate with its NGSO constellation							
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						
David Goldman	Director, Satellite 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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