APPLICATION FOR NEW OR MODIFIED RADIO STATION AUTHORIZATION UNDER PART 5 OF FCC RULES - EXPERIMENTAL RADIO SERVICE (OTHER THAN BROADCAST)

l. Applicant's Name and Post Office address (Street address, city, state, and ZIP Code. See instruction			DO NOT WRITE IN THIS BLOCK File No.				
DGS/Tel 601 Seq	NIA, STATE ecommunicat uoia Pacifi nto, CA 95	cions Divisio le Blvd.	on	0068-EX-PL-2000			
2(a). Application	for (check o	nly one box)		2(b). For Modificat	ion indicate below	•	
New station	□ Мо	dification of existin	g authorization	File No: Call Sign:			
3. Application f	or Modification	n: Check the bo	ox beside all parties an addition of	rticulars to be modif or a replacement of	ried. Check either a parameters in the	addition or re- current authorization	
FREQUENCY -		EMISSION -		D POWER -	_	TION -	
addition or [replacement?	addition or	replacement?	addition or [] i	replacement? ad	dition or [] replacement?	
		·		attached EXHIBIT No	·		
4. Particulars of	Operation (se	e instruction be	elow)	T			
Frequency (state whether kHz or MHz)		POWER	T	EMISSION	MODULATING SIGNAL	NECESSARY BANDWIDTH (kHz)	
(A)	(B)	(C)	(D)	(E) 1K50G1D	±60°, 100 BIIS	(G) 0.1	
401.85850 401.88850	10 W	100 W 100 W	PEAK PEAK	1K50G1D	±60°, 100 BITS	0.1	
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	 	 	- 			<u> </u>	
	<u> </u>	 					
							
/.> *II		L	J	<u> </u>			
(B) Insert max	imum R.F. outp	out power at the	e transmitter te	more space is requir erminals. Specify un tenna (If pulsed em	its.	 -	
(D) Insert "ME	AN" or "PEAK"	(See definitions	s in Part 5).				
	list each type of emission separately for each frequency. (See Section 2201 of FCC Rules.)						
		the type of mo					
	-	f keying in bat lating frequenc					
	cy deviation	-	••				
	ration and re						
			l in the space p was determined	rovided below. I in space provided	below. FCC	Form 442 - Page 2 March 1996	

5(a). Propo	sed location of transr	mitter and transmitting	antenna (check	only one box to indicat	e type of operation):
	FIXED/BASE	MOBILE		BASE AND MOBILE	
5(b). If per	rmanently located at a	a FIXED location, give be	elow:	5(c). If mobile, describ	e the exact area of
State	County	City or Town		operation	
CA	San Mateo	San Carlos			
Number a	nd street (or other ind	lication of location)			
CRY	STAL SPRINGS COT	TAGE 4 KM W			**
5(b)(1). Enter	geographical coordiantes e	xact to the nearest second (se	ee instruction 10)	5(c)(1)Enter geographical coo center of mobile operation	
	e (DD-MM-SS)	West Longitude (DD-MM-SS)	,,	North Latitude	West Longitude
37 °	29 45	122° 19	44	0 "	0 "
	27 13	122 17	33	<u> </u>	
	n (see instruction 10):		NAD 27	NAD 83	
		er than radar) used?	YES 🔲	NO	
	", give the following i		. 450		
		s at the half-power poir		ation in martial plans	
(D) Orie	ntation in horizontal	plane	(c) Orienta	ation in vertical plane	45°
	authorization to be use States Government?	ed for fulfilling the req	uirement of a g	overnment contract wi	th an agency of the
IF "VEC	" attach as EVHIRIT M	oa narra			ant project
	and contact number.	o a name	ilive statement	describing the governing	rent project,
		ed for the exclusive pur		ping radio equipment fo	r export to be employed
	• • • • • • • • • • • • • • • • • • •	П	YES 🔽	NO	
	, attach as EXHIBIT No f the foreign govern	o the followent concerned.	781		ct number and the
		ed for providing community the research project).	nications essent	tial to a research projec	t? (The radio communi-
If "YES"	, attach as EXHIBIT N	o a narre	ative statement	provding the following	information:
	_	re of the research proje	_		
	_	nunications facilities requommunications facilities			project involved.
10. If all th	ne answers to Items 7,	8, and 9, are "NO", attach	as EXHIBIT No.	a narrat	tive statement describing
(a) The	il the following: complete program of theory of operation.	research and experimen	ntation proposed	including description	of equipment
		ught to be accomplished.			
(c) How	the program of expe	erimentation has a reaso of the radio art, or is alo	nable promise o		evelopment, extension,
ll(a). Give	an estimate of the len	igth of time that will be	required to cor	nplete the program of e	experimentation proposed
		ne length of time in mor		thorization requested in	this application
	•	of this application come impact (see instruction 1		1.1807 of the FCC Rules,	such that it may have a
If "YE	S", attach as EXHIBIT	Noar	Environmental	· · · · · · · · · · · · · · · · ·	d by Section 1.1811.
	elow transmitting equ	sipment to be installed (if experimental, MODEL NUMB		NO. OF UNITS
	HANDAR		555		1
			<i>ر</i> يب		•

14.	Is the equi	ipment listed in Ite	em 13 capable of stat	ion identification pur	suant to Section 5.152?	YES	X	NO		
15.	Will the antenna extend more than 6 meters above the ground, or if mounted on an existing building, will it extend more than 6 meters above the building, or will the proposed antenna be mounted on an existing structure other than a building? YES NO									
•	If "YES", give the following (see instruction 9): (a) Overall height above ground to tip of antenna is meters.									
	(b) Elevation	(b) Elevation of ground at antenna site above mean sea level is meters.								
	(c) Distance to nearest aircraft landing area is kilometers.									
	the opi		ant, would tend to sh	made structures (hills, nield the antenna fron				in		
	(a) Submit	og EVUIDIT No	o vertic	al profile sketch of to	atal etmueture includiv	og supporting	• build	ding.		
	if any,	giving heights in	meters above ground	i for all significant for ating already available	eatures. Clearly indica					
16.	Applicant	is: (Check only one	boxi							
	☐ INDIV	TIDUAL AS	SOCIATION [PARTNERSHIP	CORPORATION					
	🖾 отне	R (describe in spac	e provided below)							
		GOVERNME	NTAL ENTITY							
17.	Is applican	t a foreign gover	nment or a represent	ative of a foreign go	vernment?	☐ YES	Ĕ	NO		
18.	application	Has applicant or any party to this application had any FCC station license or permit revoked or had any application for permit, license or renewal denied by this Commission?								
		tach as EXHIBIT N nd relate circumsta		tatement giving call s	ign of license or perm	nit				
19.	Will applic	ant be owner and	l operator of the stat	ion?		YES YES		NO		
20.	Give name, title, and telephone number (include area code), and Internet e-mail address (if applicable) of person who can best handle inquiries pertaining to this application.									
	Samu	el Bellow, Sen	ior Telecommunio	cations Engineer,	(916) 657-6154					
21.	By checkir he or she i conviction e.g., corpora	is not subject to a pursuant to Section partnership	idual applicant certif denial of federal ber on 5801 of the Anti- or other unincorpora	Ties that he or she is enefits, including FCC in Drug Abuse Act of 1980 ated association, certiful to that section. For definition of the control of the con	benefits, as a result o 8, 21 U.S.C. 862. A non- les that no party to	f a drug offer individual a the application	ense applica on is	ant,		
	see 47 CFR		•		,	X YES		NO		
 22.	List below	all exhibits in nu	merical sequence and	i the item number of	form requiring the e	xhibit identi	fied.			
EXH	IBIT NUMBER	ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM 1	NO. OF F	ORM 		
		10								
										

23 **CERTIFICATION:**

Attention: Read this certification carefully before signing this application.

THE APPLICANT CERTIFIES THAT:

(a) Copies of FCC Rule Parts 2 and 5 are on hand; and

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- (b) Adequate financial appropriations have been made to carry on the program of experimentation which will be conducted by qualified personnel; and
- (c) All operations will be on an experimental basis in accordance with Part 5 and other applicable rules, and will be conducted in such a manner and at such a time as to preclude harmful interference to any authorized station: and
- (d) Grant of the authorization requested herein will not be construed as a finding on the part of the Commission:
 - (i) that the frequencies and other technical parameters specified in the authorization are the best suited for the proposed program of experimentation, and
 - (2) that the applicant will be authorized to operate on any basis other than experimental, and
 - (8) that the Commission is obligated by the results of the experimental program to make provision in its rules including its table of frequency allocations for applicant's type of operation on a regularly licensed basis.

APPLICANT CERTIFIES FURTHER THAT:

- (e) All the statements in the application and attached exhibits are true, complete and correct to the best of the applicant's knowledge; and
- (f) The applicant is willing to finance and conduct the experimental program with full knowledge and understanding of the above limitations, and
- (g) The applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the USA.

March

	Signed and dated this _	TIMEG	day of	·
	Name of Applicant	California, State	of	
		lmust cor	espond with name given om page 11	_
	By GLEN S.	NASH	Her TV/	rel
	· · · · · · · · · · · · · · · · · · ·	print1	(Signature)	·
	Title CSA VII, Senio	or Telecommunications	Engineer	
C	heck appropriate classific	eation:		
	Individual applicant	☐ Member of applicant	partnership	
X	Authorized employee	Office of applicant c	orporation or association	
			ISHABLE BY FINE AND/OR IMPRISO CENSE OR CONSTRUCTION PERMIT	
	• •	ITURE (U.S. Code, Title 47, S		tatal sample into

NOTIFICATION TO INDIVIDUALS UNDER PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1980

Information requested through this form is authorized by the Communications Act of 1984, as amended, and specified by Section 308 therein. The information will be used by Federal Communications Commission staff to determine eligibility for issuing authorizations in the use of the frequency spectrum and to effect the provisions of regulatory responsibilities rendered by the Commission by the Act. Information requested by this form will be available to the public unless otherwise requested pursuant to 47 CFR 0.459 of the FCC Rules and Regulations. Your response is required to obtain this authorization.

Public reporting burden for this collection of information is estimated to average four (4) hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to the Federal Communications Commission, Records Management Branch, Paperwork Reduction Project (3060-0065), Washington, DC 20554. DO NOT send completed applications to this Individuals are not required to respond to this collection unless it displays a currently valid OMB control number.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, P.L. 96-511, DECEMBER 11, 1980, 44 U.S.C. 9507.

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