APPROVED BY OMB 3060-0065 Expires 9/30/98

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

(Street address, city, state, and ZIP Code. See instruction No. 4) Science Applications International Corporation 1710 Goodridge Drive McLean, VA 22102 2(a). Application for (check only one box) New station	2(b). For Modification File No.: Particulars to be modificated or a replacement of purpower - addition or re	Call led. Check either parameters in the Local L	Sign: WXX () addition or re- current authorization
Science Applications International Corporation 1710 Goodridge Drive McLean, VA 22102 (2a). Application for (check only one box) (A) New station	2(b). For Modification File No.: Particulars to be modificated a replacement of pure power ?	on indicate below Call led. Check either parameters in the LOC eplacement?	Sign: WXX () addition or recurrent authorization
(Xa). Application for (check only one box) X New station	File No.: particulars to be modificate or a replacement of pure power power power power paddition or reserved.	Call led. Check either parameters in the Local L	Sign: www.11 addition or recurrent authorization ATION -
New station	File No.: particulars to be modificate or a replacement of pure power power power power paddition or reserved.	Call led. Check either parameters in the Local L	Sign: www.11 addition or recurrent authorization ATION -
Application for Modification: Check the box beside all p placement to indicate whether the change is an addition FREQUENCY - EMISSION [addition or [replacement?	particulars to be modificated or a replacement of particular power - addition or re	led. Check either parameters in the Local	addition or re- current authorization
placement to indicate whether the change is an addition FREQUENCY - EMISSION - addition or replacement? addition or replacement?	particulars to be modificated or a replacement of particular power - addition or re	led. Check either parameters in the Local	addition or re- current authorization
addition or replacement? addition or replacement?	? addition or re	eplacement? a	
			ddition or [] replacement
. Particulars of Operation (see instruction below)		1	
Frequency (state whether kHz or MHz) POWER	EMISSION	MODULATING SIGNAL	NECESSARY BANDWIDTH
(A) (B) (C) (D)	(E)	(F)	(G)
N/A SEE EXHIBIT NO. 1		 	
A) List each frequency or frequency band separately. (If 3) Insert maximum R.F. output power at the transmitter t C) Insert maximum effective radiated power from the armits.	terminals. Specify unit	s.	
 Insert "MEAN" or "PEAK" (See definitions in Part 5). List each type of emission separately for each frequent insert as appropriate for the type of modulation: (!) the maximum speed of keying in bauds; (2) maximum audio modulating frequency; 	ncy. (See Section 2.20)	of FCC Rules.)	
 (3) frequency deviation of carrier; (4) pulse duration and repetition rate. For complex emissions, describe in detail in the space particle. (3) Describe how the necessary bandwidth was determined. 	=	, FCC	: Form 442 - Page 2

5(a)	•		mitter and transmitting anter	nna (check	*	-	pe of operation):	
	☐ F	IXED/BASE	X MOBILE		BASE AND MOBILE			
			a FIXED location, give below:		5(c). If mobile, des operation	cribe th	e exact area of	
Sta	N/A	County N/A	City or Town N/A		SEE EXHII	3IT 1		
Nu	mber an	d street (or other inc	lication of location)					
	N/A		\					
-		geographical coordiantes e	xact to the nearest second (see inst	ruction 10)	5(c)(1)Enter geographica	l coordina	tes of the approximate instruction 10.) See	- Exh. 1
Nort	`	(DD-MM-SS)	West Longitude (DD-MM-SS)	***************************************	North Latitude		est Longitude	
	0	, ,,	0 '	**	0 ,	" 0	1 2	
5(d)). Datum	(see instruction 10):	N/A na	D 27	NAD 88			
6.	Is a dire	ctional antenna (oth	er than radar) used? X YES		NO			
		give the following i		_				
		_	s at the half-power point plane	(c) Orienta	ation in vertical pla	ne		
7.		uthorization to be us States Government?	ed for fulfilling the requirer YES	PT 1	overnment contract	with a	n agency of the	
		attach as EXHIBIT Nand contact number.	o. N/A a narrative	statement	describing the gove	ernment	project,	
			ed for the exclusive purpose ction of a foreign governme		ing radio equipmen	t for ex	port to be employe	ed
		attach as EXHIBIT No the foreign govern	N/A the following ment concerned.		NO tion: Provide the co	ntract n	number and the	
	cation is	not the objective of	ed for providing communicat the research project).	X	NO			-
			o. N/A a narrative			ing inf	ormation:	
_	(b) A sh	owing that the comm	re of the research project be nunications facilities requeste communications facilities are	d are nece	ssary for the resear	ch proje	ect involved.	
10	IC all +b	a a marriaga ta Itama 7	8, and 9, are "NO", attach as E	VUIDIT No.	1		statement describi	
	in detail	the following:	research and experimentatio				statement describi quipment	ng
		theory of operation.	ught to be accomplished.					
	(c) How	the program of expe	rimentation has a reasonable of the radio art, or is along lin	-		e develo	opment, extension,	
11(a)). Give a		gth of time that will be requ			of expe	rimentation propos	ed
(b) If less	than 2 years, give th	e length of time in months t Exhibit 1	hat the aut	horization requested	i in this	s application	
12.			of this application come with impact (see instruction 11)?	nin Section	mm.	iles, suci	h that it may have	a
	If "YES	", attach as EXHIBIT	No. <u>N/A</u> an Env	ironmental			Section 1.1311.	
13.		low transmitting equ ACTURER	ipment to be installed (if exp	perimental, DDEL NUMB			NO. OF UNITS	-
	See 1	Exhibit 1						

14.	Is the equ	ipment listed in It	em 13 capable of stat	tion identification pursu	ant to Section 5.152?	☐ YES	on 🖾	
15.		n 6 meters above t		ove the ground, or if me the proposed antenna be YES K NO				
	If "YES", give the following (see instruction 9): (a) Overall height above ground to tip of antenna isN/A meters.							
	(b) Elevati	on of ground at a	ntenna site above m	ean sea level isN/	A meters.			
	(c) Distanc	e to nearest aircr	aft landing area is _	<u>N/A</u>		kilome	ters.	
	(d) List any natural formations of existing man-made structures (hills, trees, water tanks, towers the opinion of the applicant, would tend to shield the antenna from aircraft and thereby min aeronautical hazard of the antenna. N/A							
	n any,		meters above ground	cal profile sketch of tot d for all significant fea hting already available.	atures. Clearly indica			
16.	Applicant	is: (Check only one	boxi					
	☐ INDIV	VIDUAL AS	SOCIATION [PARTNERSHIP	CORPORATION			
	☐ OTHE	OTHER (describe in space provided below)						
17.	Is applicant a foreign government or a representative of a foreign government?						X NO	
18.				d any FCC station licen by this Commission?	se or permit revoked		-	
	·· -	=		tatement giving call sig	n of license or perm	YES	X No	
	revoked a	nd relate circumsta	ances.					
,* 	Will applie	ant be owner and	l operator of the stat	tion?		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.						of person	
	Carl W. Northrop, Esq. (202) 508-9570							
	Paul, F	lastings, Ja	nofsky & Walk	er LLP cwnor	throp@phjw.co	om		
21.		ANTI-DRUG ABUS						
	he or she i conviction e.g., corpore	is not subject to a pursuant to Sectionation, partnership	denial of federal bei on 5801 of the Anti- or other unincorpore	Fies that he or she is elther its, including FCC be Drug Abuse Act of 1988, ated association, certificate to that section. For defi	enefits, as a result of 21 U.S.C. 862. A non- es that no party to t	`a drug off individual he application	'ense applicant, on is	
	see 47 CFR			•	- •	YES	□ NO	
<u></u>	List below	all exhibits in nu	merical sequence and	d the item number of fo	orm requiring the ex	khibit ident	ified.	
								
EXH	IBIT NUMBER	ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM	NO. OF FORM	
Ехн	IBIT NUMBER	ITEM NO. OF FORM		ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM	NO. OF FORM	
Ехн	IIBIT NUMBER			ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM	NO. OF FORM	
Ехн	IBIT NUMBER	4 (A-G),5(C)		ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM	NO. OF FORM	
Ехн	1	4 (A-G),5(C)		ITEM NO. OF FORM	EXHIBIT NUMBER	ITEM	NO. OF FORM	

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
- (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
 - (3) 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.

Signed and dated this 27 Wolfender day of	r, 19 <u>9</u> 7
Name of Applicant Science Applications Inte	rnational Corporation
laust correspond with	name given on page 11
By SUSAN Frank Sex	sar Frik
lprint1	(signature)
Title Senin Counsel	
Check appropriate classification:	
☐ Individual applicant ☐ Member of applicant partnershi	lp
Authorized employee 🛛 Office of applicant corporation	or association
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE B 18 Section 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR Section 312(a)(1), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503	CONSTRUCTION PERMIT (U.S. Code, Title 47,

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 1934, as amended, and specified by Section 808 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.