

EXHIBIT NO. 1
FCC FORM 442
ITEMS 10, 11

This application is for classroom, demonstration and research use by Magnavox of an INMARSAT-C satellite communications terminal which is being added to the line of Magnavox satcom products.

The terminal being licensed will be used in a variety of marine and land environments, to develop student knowledge in installation, operation and maintenance of the equipment; to provide customer support for systems already purchased; and to demonstrate the use of INMARSAT-C to prospective buyers.

The duration of the license requested is indefinite.

**Inmarsat**

Maritime Commissioning Application Form

For an Inmarsat ship earth station (SES)

Land-mobile users should obtain the Land-mobile Commissioning Application Form.

Please type or write in BLOCK CAPITALS and forward the form to your national Routing Organization.

Explanatory notes are attached to assist you.

Do not fill in the shaded areas.

RO Office use only:

RO

Appl No.

Country

Date

Use

Bus. Unit

App.

SES Mfr.

S/W Rev No.:

Channel No. 1:

IMN 1:

IMN 2:

Channel No. 2:

IMN 1:

IMN 2:

Channel No. 3:

IMN 1:

IMN 2:

Channel No. 4:

IMN 1:

IMN 2:

SECTION A APPLICATION DETAILS

Routing Organization: COMSAT Mobile Communications

Country (of registration): USA

SES type: Inmarsat-A ☐ Inmarsat-B ☐ Inmarsat-C ☒ Inmarsat-M ☐

Usage of SES: Mobile ☐ Fixed ☐

LAN/(SHR)

SECTION B APPLICANT DETAILS

Name: MAGNAVOX ELECTRONIC SYSTEMS COMPANY

Address: West Coast Division

2829 Maricopa Street

Torrance, CA 90503

Post/Zip: 90503

Tlx: 696101

Tel: 310/618-1200

Fax: 310/618-7001

SECTION C SES EQUIPMENT DETAILS

Manufacturer: MAGNAVOX Model: MX1400 MAGNAPhone-C

Serial Number: 9300265 Antenna size (m): 237mm x 150mm Conical

Software Revision No: PR-2-00 (-23dB/K at 5° elevation)

SECTION D - Inm-A CHANNEL DETAILS (Inmarsat-A only)

Enter Y or N as appropriate for the number of channels required:

	Ch 1	Ch 2	Ch 3	Ch 4
Main I/D:				
Privacy Y/N:				
Voice:				
Telex:				
Answerback:				
HSD:				
DHSD:				
Other (specify):				
2nd I/D Y/N:				
Privacy Y/N:				
Voice:				
HSD:				
DHSD:				
Other (specify):				

Do not fill in the shaded areas

RO Office use only:

Tlx answerback:

Install code:

Category code:

Acctg. Auth:

Billing Entity

Credit/charge card:

SECTION D - Inm-C CHANNEL DETAILS (Inmarsat-C only)

Telex answerback (4 letters): MXFE

SECTION E INSTALLATION DETAILS

Note:

The use of an Inmarsat transportable land-mobile earth station in a maritime environment is not permitted under the Terms and Conditions for the utilization of the Inmarsat Space Segment, as it is not type-approved for a maritime environment, and is incapable of generating priority 3 distress alerts.

Installation name: Classroom/Demonstration

Installation category: LAN/(SHR) MAGNAVOX #1

National Licensing Authority: FCC

National Reg. No: _____

For a mobile installation, complete the following section:

Radio call sign: _____ Gross tonnage: _____

MMSI (ITU No.): _____ Year built: _____

Vessel length (m): _____ No. of passengers: _____

For a fixed installation, complete the following section:

Location: _____

Intended use: _____

In the fixed installation, indicate how the ship earth station will be operated:

Attended ☐ Unattended ☐

SECTION F ACCOUNTING and BILLING DETAILS

ACCOUNTING AUTHORITY (mandatory): Federal Communications Commission

Address: Chief, International Telecom Settlements

P.O. Box 70

Gettysburg, PA

Post/Zip: 17325

Tlx: US 01

Tel: _____ Fax: _____

BILLING ENTITY (optional): Same as Applicant

Address: _____

Post/Zip: _____ Tlx: _____

Tel: _____ Fax: _____

CREDIT/CHARGE CARD:

Card type: None Expiry date: _____

Card number: _____

Name (on card): _____

Do not fill in the shaded areas.

RO Office use only:

Install. Owner:

Install. Licensee:

Install. Mgr:

Comm. CES:

Comm. Agent:

SECTION G OWNER/LICENSEE/MANAGER DETAILS

INSTALLATION OWNER: Same as Applicant

Address: _____

Post/Zip: _____ Tlx: _____
Tel: _____ Fax: _____

INSTALLATION LICENSEE: Same as Applicant

Address: _____

Post/Zip: _____ Tlx: _____
Tel: _____ Fax: _____

INSTALLATION MANAGER: Same as Applicant

Address: _____

Post/Zip: _____ Tlx: _____
Tel: _____ Fax: _____

SECTION H COMMISSIONING DETAILS (Inmarsat-A only)

COMMISSIONING CES: _____

Comm. Date: _____ Comm. Site: _____

COMMISSIONING AGENT: _____

Address: _____

Post/Zip: _____ Tlx: _____
Tel: _____ Fax: _____

CERTIFICATION and AGREEMENT

The Applicant agrees to comply with the attached Terms and Conditions for the utilization of the Inmarsat space segment applicable to the ship earth station (SES) described in this Application, and the Routing Organization agrees, pursuant to Article XIV of the Inmarsat Operating Agreement, to be responsible to Inmarsat for such compliance by the SES.

Applicant Name: MAGNAVOX ELECTRONIC
SYSTEMS COMPANY Signature: [Signature] Date: 8/10/93

R.O. Rep. Name: _____ Signature: _____ Date: _____