Approved by OMB 3060–0678

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APPLICATION FOR SATELLITE SPACE STATION AUTHORIZATIONS	FCC Use Only
FCC 312 MAIN FORM	
FOR OFFICIAL USE ONLY	

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:

Notification of Pro Forma Transfer of Control of Permitted List Satellite Horizons I (Call Sign S2475)

1–8. Le	egal Name of A	pplicant		
	Name:	Horizons-1 Satellite LLC	Phone Number:	703–559–7848
	DBA Name:		Fax Number:	703-559-8539
	Street:	7900 Tysons One Place	E–Mail:	susan.crandall@intelsat.com
	City:	McLean	State:	VA
	Country:	USA	Zipcode:	22102 -5972
	Attention:	Susan H Crandall		

9–16. Name of Contact Representative					
Name:	Jennifer D. Hind	Phone Number:	202-719-4975		
Company:	Wiley Rein LLP	Fax Number:	202-719-7049		
Street:	1776 K Street N	E–Mail:	jhindin@wileyrein.c	om	
City:	Washington	State:	DC		
Country:	USA	Zipcode:	20006 –		
Attention:		Relationship:	Legal Counsel		
CLASSIFICATION (OF FILING				
 17. Choose the buttom classification that appliboth questions a. and b for 17a and only one for a. (N/A) a1. Earth Station a2. Space Station 	ies to thisfiling for b. Choose only one or 17b.	 b. b1. Application for License of New Stati (N/A) b2. Application for Registration of N (N/A) b3. Amendment to a Pending Applica (N/A) b4. Modification of License or Regist (N/A) b5. Assignment of License or Registr (N/A) b5. Assignment of License or Registr (N/A) b6. Transfer of Control of License or (N/A) b7. Notification of Minor Modification (N/A) b8. Application for License of New F b9. Letter of Intent to Use Non–U.S. Lie b10. Replacement Satellite Application b11. Replacement Satellite Application processing) b12. Petition for Declaratory Ruling to R N/A) b13. Other (Please specify) 	ew Domestic Receive–Only Sta ation tration ation Registration on Receive–Only Station Using Nor censed Satellite to Provide Servi – no new frequency bands – new frequency bands (Not elig	n–U.S. Licensed Satellite	

17c. 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): Permitted List Filing – No Fee Required				
17c. Fee Classification BNY – Space Station (Geostationary)				
18. If this filing is in reference to an existing station, enter:				
(a) Call sign of station:				
Not Applicable				
19. If this filing is an amendment to a pending application enter:				
(a) Date pending application was filed:	(b) File number of pending application:			
Not Applicable	Not Applicable			

TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provide or use the following type(s) of service(s): Select all that apply:				
a. Fixed Satellite				
b. Mobile Satellite				
c. Radiodetermination Satellite				
d. Earth Exploration Satellite				
e. Direct to Home Fixed Satellite				
f. Digital Audio Radio Service				
g. Other (please specify)				
21. STATUS: Choose thebutton next to the applicable status. Choose only one.	22. If earth station applicant, check all that apply. Not Applicable			
Common Carrier Non–Common Carrier				
23. If applicant is providing INTERNATIONAL COMMON CARRIER service, see instructions regarding Sec. 214 filings. Choose one. Are these facilities:				
• Connected to a Public Switched Network • Not connected to a Public Switched Network • N/A				
24. FREQUENCY BAND(S): Place an "X" in the box(es) next to all applicable frequency band(s).				
a. C–Band (4/6 GHz) b. Ku–Band (12/14 GHz)				
c.Other (Please specify upper and lower frequencies in MHz.)				
Frequency Lower: Frequency Upper: (Please specify addi	Frequency Lower: Frequency Upper: (Please specify additional frequencies in an attachment)			

TYPE OF STATION

5. CLASS OF STATION: Choose the button next to the class of station that applies. Choose only one.
N/A) a. Fixed Earth Station N/A) b. Temporary–Fixed Earth Station N/A) c. 12/14 GHz VSAT Network N/A) d. Mobile Earth Station e. Geostationary Space Station.
f. Non–Geostationary Space Station
g. Other (please specify)
6. TYPE OF EARTH STATION FACILITY: Not Applicable
PURPOSE OF MODIFICATION
27. The purpose of this proposed modification is to: (Place an "X" in the box(es) next to all that Not Applicable apply.)
ENVIRONMENTAL POLICY
28. Would a Commission grant of any proposal in this application or amendment have a significant environmental 👩 Yes 👩 No

impact as defined by 47 CFR 1.1307? If YES, submit the statement as required by Sections 1.1308 and 1.1311 of the Commission's rules, 47 C.F.R. §§ 1.1308 and 1.1311, as an exhibit to this application. A Radiation Hazard Study must accompany all applications for new transmitting facilities, major modifications, or major amendments.

ALIEN OWNERSHIP

Earth station applicants not proposing to provide broadcast, common carrier, aeronautical en route or aeronautical fixed radio station services are not required to respond to Items 30–34.

29. Is the applicant a foreign government or the representative of any foreign government?	O Yes ● No
30. Is the applicant an alien or the representative of an alien?	O ^{Yes} ⊗ ^{No} O ^{N/A}
31. Is the applicant a corporation organized under the laws of any foreign government?	O ^{Yes} ⊗ ^{No} O ^{N/A}
32. Is the applicant a corporation of which more than one–fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	O ^{Yes} ⊗ ^{No} O ^{N/A}
33. Is the applicant a corporation directly or indirectly controlled by any other corporation of which more than one–fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	●Yes ●No ●N/A
34. If any answer to questions 29, 30, 31, 32 and/or 33 is Yes, attach as an exhibit an identification of the aliens or foreign entities, their nationality, their relationship to the applicant, and the percentage of stock they own or vote. BASIC QUALIFICATIONS	

35. Does the Applicant request any waivers or exemptions from any of the Commission's Rules? If Yes, attach as an exhibit, copies of the requests for waivers or exceptions with supporting documents.	0	Yes	● ¹	No
36. Has the applicant or any party to this application or amendment had any FCC station authorization or license revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construction permit denied by the Commission? If Yes, attach as an exhibit, an explination of circumstances.	0	Yes	۲	No
37. Has the applicant, or any party to this application or amendment, or any party directly or indirectly controlling the applicant ever been convicted of a felony by any state or federal court? If Yes, attach as an exhibit, an explination of circumstances.	0	Yes	۲	No
38. Has any court finally adjudged the applicant, or any person directly or indirectly controlling the applicant, guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement or any other means or unfair methods of competition? If Yes, attach as an exhibit, an explanation of circumstances	0	Yes	۲	No
39. Is the applicant, or any person directly or indirectly controlling the applicant, currently a party in any pending matter referred to in the preceding two items? If yes, attach as an exhinit, an explanation of the circumstances.	0	Yes	۲	No

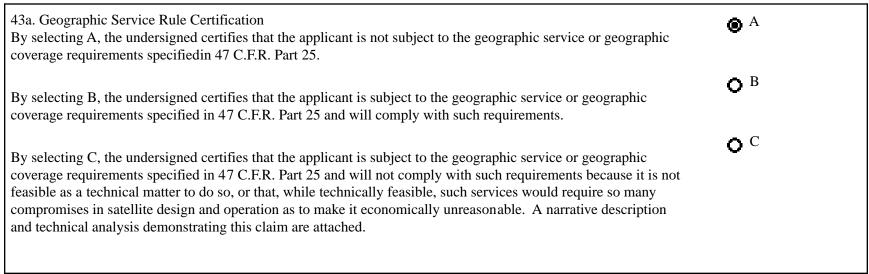
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40. If the applicant is a corporation and is applying for a space station license, attach as an exhibit the names, address, and citizenship of those stockholders owning a record and/or voting 10 percent or more of the Filer's voting stock and the percentages so held. In the case of fiduciary control, indicate the beneficiary(ies) or class of beneficiaries. Also list the names and addresses of the officers and directors of the Filer.				
41. 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.	۲	Yes	0	No
42a. Does the applicant intend to use a non–U.S. licensed satellite to provide service in the United States? If Yes, answer 42b and attach an exhibit providing the information specified in 47 C.F.R. 25.137, as appropriate. If No, proceed to question 43.	۲	Yes	0	No
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued, what administration has coordinated or is in the process of coordinating the space station? Japan				

43. Description. (Summarize the nature of the application and the services to be provided). (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

Horizons-1 Satellite LLC herein notifies the Commission of the pro forma transfer of control of the Permitted List satellite Horizons I as a result of corporate changes.

Pro Forma Attachment



CERTIFICATION

The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. The applicant certifies that grant of this application would not cause the applicant to be in violation of the spectrum aggregation limit in 47 CFR Part 20. All statements made in exhibits are a material part hereof and are incorporated herein as if set out in full in this application. The undersigned, individually and for the applicant, hereby certifies that all statements made in this application and in all attached exhibits are true, complete and correct to the best of his or her knowledge and belief, and are made in good faith.

44. Applicant is a (an): (Choose the button next to applicable response.)					
O Individual					
O Unincorporated Association					
• Partnership	• Partnership				
• Corporation					
o Governmental Entity					
• Other (please specify) Limited Liability Company					
45. Name of Person Signing Susan H. Crandall	46. Title of Person Signing Assoc. General Counsel, Intelsat US LLC				
47. Please supply any need attachments.					
1: 2: 3:					
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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