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APP	LICATION FOR EARTH STATIC	ON AUTHORIZATIONS	FCC Use Only
	FCC 312 MAIN FORM FOR OF	FICIAL USE ONLY	
APPLICANT INFOR	ΜΑΤΙΟΝ		
	this application to identify it on	the main menu:	
DIRECTV Enterprises	s 1.8 T/R – CRBC		
1–8. Legal Name of App	plicant		
Nome	DIDECTV Entermised LLC	Phone Number:	310-798-0753
Name:	DIRECTV Enterprises, LLC		
DBA Name:		Fax Number:	240-358-0569
Street:	2230 E. Imperial Hwy	E-Mail:	jwengryniuk@directv.com
City:	El Segundo	State:	СА
Country:	USA	Zipcode:	90245 –
Attention:	Jack Wengryniuk		

Name:	William M. Wiltshire	Phone Number:	202-730-1350
Company:	Harris, Wiltshire & Grannis, LLP	Fax Number:	202-730-1301
Street:	1200 18th Street, NW	E-Mail:	wwiltshire@harriswiltshire.com
	12th Floor		
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036-
Attention:		<b>Relationship:</b>	Legal Counsel

## CLASSIFICATION OF FILING

17. Choose the button next to the classification that applies to this filing for both questions a. and b. Choose only one for 17a and only one for 17b.	<ul> <li>b.</li> <li>b1. Application for License of New Station</li> <li>b2. Application for Registration of New Domestic Receive–Only Station</li> <li>(N/A) b3. Amendment to a Pending Application</li> </ul>
a. al. Earth Station (N/A) a2. Space Station	<ul> <li>(N/A) b4. Modification of License or Registration</li> <li>(N/A) b5. Assignment of License or Registration</li> <li>(N/A) b5. Assignment of License or Registration</li> <li>(N/A) b6. Transfer of Control of License or Registration</li> <li>(N/A) b7. Notification of Minor Modification</li> <li>(N/A) b8. Application for License of New Receive–Only Station Using Non–U.S. Licensed</li> <li>Satellite</li> <li>(N/A) b9. Letter of Intent to Use Non–U.S. Licensed Satellite to Provide Service in the United</li> <li>States</li> <li>b10. Other (Please specify)</li> <li>b11. Application for Earth Station to Access a Non–U.S. satellite Not Currently Authorized to</li> <li>Provide the Proposed Service in the Proposed Frequencies in the United States.</li> </ul>

<ul> <li>17c. Is a fee submitted with this application?</li> <li>If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).</li> <li>Governmental Entity Noncommercial educational licensee</li> <li>Other(please explain):</li> </ul>			
17d.			
Fee Classification BAX – Fixed Satellite Transmit/Receive Earth Station			
<ul><li>18. If this filing is in reference to an existing station, enter:</li><li>(a) Call sign of station: Not Applicable</li></ul>	<ul><li>19. If this filing is an amendment to a pending a</li><li>(a) Date pending application was filed:</li><li>Not Applicable</li></ul>	pplication enter: (b) File number of pending application: 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): 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 the button next to the applicable status. Choose	22. If earth station applicant, check all that apply.
only one.	Using U.S. licensed satellites
○ Common Carrier	Using Non–U.S. licensed satellites
23. If applicant is providing INTERNATIONAL COMMON CARRIER s facilities:	service, see instructions regarding Sec. 214 filings. Choose one. Are these
• 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 a	pplicable 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: 19700 Frequency Upper: 30000	

### TYPE OF STATION

25. CLASS OF STATION: Choose the button next to the class of station that applies. Choose only one.
a. Fixed Earth Station
• b. Temporary–Fixed Earth Station
• c. 12/14 GHz VSAT Network
O d. Mobile Earth Station
(N/A) e. Geostationary Space Station
(N/A) f. Non–Geostationary Space Station g. Other (please specify)
26. TYPE OF EARTH STATION FACILITY: Choose only one. Transmit/Receive Transmit–Only Receive–Only N/A

#### PURPOSE OF MODIFICATION

27. The purpose of this proposed modification is to: (Place an 'X' in the box(es) next to all that apply.)

Not Applicable

#### ENVIRONMENTAL POLICY

28. Would a Commission grant of any proposal in this application or amendment have a significant environmental 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 O N/A
30. Is the applicant an alien or the representative of an alien?	O Yes O No ⊚ N/A

No No

31. Is the applicant a corporation organized under the laws of any foreign government?	O Yes O No ⊚ 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 O No ⊚ 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?	O Yes O 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.	O Yes	● <sup>No</sup>

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.	O Yes	● 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.	O Yes	No
38. Has any court finally adjudged the applicant, or any person directly or indirectly controlling the applicant, guilty of unlawfully monopolizing or attemptiing 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	O Yes	● 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.	O Yes	lo No

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.	Yes	<b>O</b> 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.	O Yes	● No
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued, v coordinated or is in the process of coordinating the space station?N/A	vhat administr	ration has

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.)

DIRECTV Enterprises, LLC seeks authority to operate a new Ka-band earth station at its existing Colorado facility.

1.8m Antenna Pattern

#### 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.)

Individual

O Unincorporated Association

- Partnership
- Corporation
- Governmental Entity
- Other (please specify)

Limited Liability Company

45. Name of Person Signing James Butterworth		46. Title of Person Signing Senior Vice President	
47. Please supply any need attachments.			
Attachment 1:	Attachment 2:		Attachment 3:
	ion 1001), AND/OR REVO	OCATION OF ANY S	Y FINE AND / OR IMPRISONMENT STATION AUTHORIZATION de, Title 47, Section 503).

#### SATELLITE EARTH STATION AUTHORIZATIONS FCC Form 312 – Schedule B:(Technical and Operational Description) FOR OFFICIAL USE ONLY

Location of Earth S	tation Site				
E1: Site Identifier:	SST 1.8M	E5. Call Sign:			
E2: Contact Name	Don Jones	E6. Phone Number:	303-660-7001		
E3. Street:	393 Inverness Parkway	E7. City:	Englewood		
		E8. County:	Douglas		
E4. State	СО	E9. Zip Code	80112		
E10. Area of Opera	tion:	Colorado			
E11. Latitude:	33 °16 '38.5 "N				
E12. Longitude:	104 °48 '26.0 "W				
E13. Lat/Lon Coord	dinates are:	O NAD-27	● NAD-83	O <sup>N/A</sup>	
E14. Site Elevation	(AMSL):	2096.0 meters			

E15. If the proposed antenna(s) operate in the Fixed Satellite Service (FSS) with geostationary satellites, do(es) the proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a) and (b) as demonstrated by the manufacturer's qualification measurement? If NO, provide as a technical analysis showing compliance with two–degree spacing policy.	• Yes	O <sup>No</sup>	O <sup>N/A</sup>
E16. If the proposed antenna(s) do not operate in the Fixed Satellite Service (FSS), or if they operate in the Fixed Satellite Service (FSS) with non–geostationary satellites, do(es) the proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a2) and (b) as demonstrated by the manufacturer's qualification measurements?	O Yes	<b>○</b> <sup>No</sup>	● N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	• Yes	0	No

E18. Is frequency coordination required? If YES, attach a frequency coordination report as	0	Yes	۲	No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	0	Yes	۲	No
E20. FAA Notification – (See 47 CFR Part 17 and 47 CFR part 25.113(c)) Where FAA notification is required, have you attached a copy of a completed FCC Form 854 and or the FAA's study regarding the potential hazard of the structure to aviation? FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION.	0	Yes	۲	No

#### POINTS OF COMMUNICATION

Satellite Name:SPACEWAY 2 | SPACEWAY 2 | 99 W.L. If you selected OTHER, please enter the following:

E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:

Satellite Name:DIRECTV 8   DIRECTV 8   101 W.L.	If you selected OTHER, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:

Satellite Name:OTHER   OTHER   If you selected OTHER, p	If you selected OTHER, please enter the following:		
E21. Common Name: ALSAT	E22. ITU Name:		
E23. Orbit Location:	E24. Country: USA		

Satellite Name:SPACEWAY 1   SPACEWAY 1   103 W.L. If you	selected OTHER, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
POINTS OF COMMUNICATION (Destination Points)	•

E25. Site Identifier: SST 1.8M	
E26. Common Name:	E27. Country:USA

ANTENNA

Site ID	E28. Antenna Id	E29. Quantity	E30. Manufacturer		Size <meters></meters>	E41/42. Antenna GainTransmint and/or Recieve (dBi at GHz)
SST 1.8M	TR 1.8	1	PRODELIN	3180–131	1.8	49.9 dBi at 20.0

		53.3 dBi at 30.0
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Id	Diameter	E35. Above Ground Level  (meters)	(meters)	Height Above Ground Level 	Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers  (dBW)
TR 1.8	1.8/1.8	3.79	2099.79	0.0	8.5	0.0	62.6

# FREQUENCY

E28. Antenna Id	E43/44. Frequency Bands (MHz)	E45. T/R Mode			E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
TR 1.8	19700 20200	R	Left and Right Circular	165MG7W	0.0	0.0

E50. Modulation and Services (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

500 MHz WIDE, QPSK, DIGITAL CARRIER

TR 1.8	29500 30000	Left and Right Circular	650KG7W	42.0	19.9

E50. Modulatio entirety.)	n and Services	(If the complete de	escription does not appear	in this box, please	go to the end of the	he form to view it in its
512 KBPS,	QPSK, DIGIT	TAL CARRIER				
TR 1.8	29500 30000	Т	Left and Right Circular	2M61G7W	48.0	19.9
E50. Modulatio entirety.)		GITAL CARRIER	escription does not appear			
TR 1.8	29500 30000	Т	Left and Right Circular	20M9G7W	57.0	19.8
E50. Modulatio entirety.)		(If the complete de	escription does not appear	in this box, please	go to the end of the	he form to view it in its

FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	E54/55. Range of Satellite Arc E/W Limit	E56. Earth Station Azimuth Angle Eastern Limit	E57. Antenna Elevation Angle Eastern Limit	E58. Earth Station Azimuth Angle Western Limit	E59. Antenna Elevation Angle Western Limit	E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
TR 1.8 C	Geostationary	19700 20200	60.0/ 143.0	122.52	25.47	231.18	29.93	-36.6
	Geostationary	29500 30000	60.0/ 143.0	122.52	25.47	231.18	29.93	-36.6
REMOTE CO	NTROL POIN	T LOCATION			•	•	•	
	gn se enter the calls ich this application	<b>v</b>	÷	301-	. Phone Number -428–7180			
E62. Street A 11717 Explo	Address oration Lane							
E63. City Germantown	n		E67. County Montgomer			E64/68. State/Country MD/ US.	A	E66. Zip Code 20876

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