Date & Time Filed: Jun 28 2005 5:28:04:323PM File Number: SES–LIC–INTR2005–01432 Callsign/Satellite ID:

APF	PLICATION FOR EARTH STATIO	N AUTHORIZATIONS		FCC Use Only
FCC 312 MAIN FORM FOR OFFICIAL USE ONLY				
APPLICANT INFOR	MATION			
Enter a description of	this application to identify it on	the main menu:		
Lurline Avenue Ku–B	and/VSAT			
1–8. Legal Name of Ap	plicant			
Name:	FiberSat Global Services, Inc.	Phone Number:	818-	-678-2020
DBA Name:		Fax Number:	818-	-678-2041
Street:	20640 Bahama St.	E-Mail:	rpate	el@fibersatgs.com
City:	Chatsworth	State:	CA	
Country:	USA	Zipcode:	913	11 –
Attention:	Mr. Ravi Patel			

Name:	David S. Keir	Phone Number:	202-429-8970
Company:	Leventhal Senter & Lerman PLLC	Fax Number:	202–293–7783
Street:	2000 K Street, N.W.	E-Mail:	dkeir@lsl-law.com
	Suite 600		
City:	Washington	State:	DC
Country:	USA	Zipcode:	20006-
Attention:	David S. Keir	<b>Relationship:</b>	Legal Counsel

### CLASSIFICATION OF FILING

<ul> <li>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.</li> <li>a.</li> <li>a1. Earth Station</li> <li>(N/A) a2. Space Station</li> </ul>	<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> <li>(N/A) b4. Modification 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 Satellite</li> <li>(N/A) b9. Letter of Intent to Use Non–U.S. Licensed Satellite to Provide Service in the United 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> </ul>
	Provide the Proposed Service in the Proposed Frequencies in the United States.

<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></ul>				
• Governmental Entity • Noncommercial educational licensee				
• Other(please explain):				
17d.				
Fee Classification BGV – Fixed Satellite VSAT System				
<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 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): 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) k. Ku–Band (12/14 GHz)	
c.Other (Please specify upper and lower frequencies in MHz.)	
Frequency Lower: Frequency Upper:	

### 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
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.

Yes	۲	No
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RadHaz 9.	0m
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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 O No ⊚ N/A

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

<ul> <li>a. By checking Yes, the undersigned certifies, that neither applicant nor any other party to the application is abject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 7 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.</li> </ul>	• Yes	O No
2a. Does the applicant intend to use a non–U.S. licensed satellite to provide service in the United States? If Yes, nswer 42b and attach an exhibit providing the information specified in 47 C.F.R. 25.137, as appropriate. If No, roceed to question 43.	O Yes	● No
nswer 42b and attach an exhibit providing the information specified in 47 C.F.R. 25.137, as appropriate. If No,		

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.)

Application for authorization for a 9.0 meter Ku-Band transmit Earth station and associated 1.8 meter remote stations comprising a VSAT network.

RadHaz 1.8m

### 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)

45. Name of Person Signing Ravi Patel		46. Title of Person Signing President and COO		
7. Please supply any need attachment	nts.			
Attachment 1:	Attachment 2:	Attachment 3:		
(U.S. Code, T	Title 18, Section 1001), AND/OR R	ARE PUNISHABLE BY FINE AND / OR I EVOCATION OF ANY STATION AUTHOR FORFEITURE (U.S. Code, Title 47, Section )	IZATION	

### 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:	HUB	E5. Call Sign:			
E2: Contact Name	Mike Smith	E6. Phone Number:	818-678-2020		
E3. Street:	9229 Lurline Avenue	E7. City:	Chatsworth		
		E8. County:	Los Angeles		
E4. State	CA	E9. Zip Code	91311		
E10. Area of Opera	tion:	9229 Lurline Aven	ue, Chatsworth, CA	91311	
E11. Latitude:	34 °14 '20.0 "N				
E12. Longitude:	118 °35 '8.0 "W				
E13. Lat/Lon Coord	linates are:	ONAD-27	NAD-83	O <sup>N/A</sup>	
E14. Site Elevation (AMSL):		273.0 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	<b>O</b> <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	O <sup>No</sup>	● <sup>N/A</sup>
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: ALSAT | ALL AUTHORIZED U.S. | ALSAT 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:	
E26. Common Name:	E27. Country:

## ANTENNA

Site ID	E28. Antenna Id	E29. Quantity	E30. Manufacturer		E32. Antenna Size <meters></meters>	E41/42. Antenna GainTransmint and/or Recieve (dBi at GHz)
HUB	L19	1	Vertex/RSI	КРК	9.0	58.6 dBi at 12.00
						60.1 dBi at 14.25

Id	E33/34. Diameter Minor/Major (meters)	E35. Above Ground Level  (meters)	(meters)	0	Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers  (dBW)
L19	0.0/0.0	9.0	282.0	0.0	61.6	0.0	78.0

# FREQUENCY

E28. Antenna Id	E43/44. Frequency Bands	E45. T/R Mode			E48. Maximum EIRP per Carrier	E49. Maximum
	(MHz)		L,R)	Designator	-	Carrier
						(dBW/4kHz)

L19	11700 12200	R	Horizontal and Vertical	2K00Q7D	0.0	0.0
E50. Modulat entirety.)	tion and Services (1	If the complete d	escription does not appear	in this box, please	go to the end of t	the form to view it in its
TDM VSAT	Γ Data					
L19	11700 12200	R	Horizontal and Vertical	36M0G1D	0.0	0.0
	SK MPEG Data					
L19	14000 14500	Т	Horizontal and Vertical	2K00Q7D	46.1	46.1
E50. Modulat entirety.)		If the complete d	escription does not appear	in this box, please	go to the end of t	the form to view it in its

L19		14000 14500	Т	Horizontal and Vertical	36M0G1D	74.0	34.4					
E	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											
entir	ety.)											
	8PSK/QPSK	MPEG Data										

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)
L19	Geostationary	11700 12200	80.0/ 135.0	125.2	33.0	207.6	46.5	0.0
	Geostationary	14000 14500	80.0/ 135.0	125.2	33.0	207.6	46.5	-20.95

### REMOTE CONTROL POINT LOCATION

E61. Call Sign NOTE: Please enter the callsign of the controlling station, not the callsign for which this application is being filed.	E65. Phone Number 818–678–2020
E62. Street Address 20640 Bahama Street	

E63. City Chatsworth	E67. County Los Angeles	E64/68. State/Country CA/ USA	E66. Zip Code 91311
		0.00	

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

Location of Earth Station Site			
E1: Site Identifier: REMOTE X	E5. Call Sign:		
E2: Contact Name Mike Smith	E6. Phone Number:	818-678-2020	
E3. Street:	E7. City:		
	E8. County:		
E4. State	E9. Zip Code		
E10. Area of Operation:	CONUS		
E11. Latitude: 0 °0 '0.0 "			
E12. Longitude: 0 °0 '0.0 "			
E13. Lat/Lon Coordinates are:	O NAD-27	<b>O</b> NAD-83	● N/A
E14. Site Elevation (AMSL):	0.0 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	<b>O</b> <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	O <sup>No</sup>	● <sup>N/A</sup>
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	•	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	•	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	•	No

#### POINTS OF COMMUNICATION

Satellite Name: ALSAT | ALL AUTHORIZED U.S. | ALSAT 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:	
E26. Common Name:	E27. Country:

## ANTENNA

Site ID	E28. Antenna Id	E29. Quantity	E30. Manufacturer	E31. Model	E32. Antenna Size <meters></meters>	E41/42. Antenna GainTransmint and/or Recieve (dBi at GHz)
REMOTE X	AIT–GX	25	Prodelin/IDirect	Series 1184	1.8	45.0 dBi at 12.0
						46.5 dBi at 14.25

E28. Antenna Id	E33/34. Diameter Minor/Major (meters)	E35. Above Ground Level  (meters)	(meters)	0	Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers  (dBW)
AIT-GX	0.0/0.0	1.8	0.0	0.0	2.0	0.0	49.5

# FREQUENCY

 E43/44. Frequency Bands		E48. Maximum EIRP per Carrier	E49. Maximum ERIP Density per
(MHz)	L,R)		Carrier (dBW/4kHz)

AIT–GX	11700 12200	R	Horizontal and Vertical	2K00Q7D	0.0	0.0
E50. Modula entirety.)	tion and Services (1	f the complete d	escription does not appear	in this box, please	go to the end of t	he form to view it in its
TDM VSA	T Data					
AIT–GX	11700 12200	R	Horizontal and Vertical	36M0G1D	0.0	0.0
8 PSK/Q	PSK MPEG Data					
AIT-GX	14000 14500	Т	Horizontal and Vertical	2K00Q7D	32.5	32.5
E50. Modula entirety.) TDMA VS		f the complete d	escription does not appear	in this box, please	go to the end of t	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)
AIT-GX	Geostationary	11700 12200	80.0/ 135.0	125.2	33.0	207.6	46.5	0.0
	Geostationary	14000 14500	80.0/ 135.0	125.2	33.0	207.6	46.5	-20.95
REMOTE CC	NTROL POIN	T LOCATION	•	•	•	•	•	
	gn use enter the calls ich this application	-	-	818-	. Phone Number -678–2020			
E62. Street 20640 Baha				·				
E63. City Chatsworth			E67. County Los Angeles			E64/68. State/Country CA/ USA		E66. Zip Code 91311

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