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Callsign/Satellite ID:

APPLICATION FOR EARTH 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:

Application for Earth Station

1–8. Le	gal Name	of App	licant
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Name: Chicago, City of/ Ofc of Phone Number: 312–746–9239

Emergency Communications

DBA Fax Number: 312–746–9202

Name:

Street: 1411 W Madison **E–Mail:**

City: Chicago State: IL

Country: USA Zipcode: 60607 -

Attention: Mr James Argiropoulos

9–16. Name of Contact Representative

Name: Chicago, City of/ Ofc of Phone Number: 312–746–9239

Emergency Communications

Company: Fax Number: 312–746–9202

Street: 1411 W Madison **E-Mail:**

City: Chicago State: IL

Country: USA Zipcode: 60607–

Attention: Mr James Argiropoulos **Relationship:**

CLASSIFICATION OF FILING

CEASSII ICATION 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. a. a. a. a. A. A. A. B. Barth Station (N/A) a2. Space Station	b. b1. Application for License of New Station b2. Application for Registration of New Domestic Receive—Only Station (N/A) b3. Amendment to a Pending Application (N/A) b4. Modification of License or Registration (N/A) b5. Assignment of License or Registration (N/A) b6. Transfer of Control of License or Registration (N/A) b7. Notification of Minor Modification (N/A) b8. Application for License of New Receive—Only Station Using Non—U.S. Licensed Satellite (N/A) b9. Letter of Intent to Use Non—U.S. Licensed Satellite to Provide Service in the United States b10. Other (Please specify) b11. Application for Earth Station to Access a Non—U.S.satellite Not Currently Authorized to Provide the Proposed Service in the Proposed Frequencies in the United States. b12. Application for Database Entry (N/A) b13. Amendment to a Pending Database Entry Application (N/A) b14. Modifiction of Database Entry			
17c. Is a fee submitted with this application	ion?			
I ==	159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).			
Governmental Entity Noncommercial educational licensee				
Other(please explain):				
17d.				
Fee Classification				

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
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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	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				
O Common Carrier Non–Common Carrier	Using Non–U.S. licensed satellites				
23. If applicant is providing INTERNATIONAL COMMON CARRIER sefacilities:	ervice, see instructions regarding Sec. 214 filings. Choose one. Are these				
O Connected to a Public Switched Network Not connected to	o a Public Switched Network				

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:			
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.	C	Yes	⊚ No	D.
ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aerona aeronautical fixed radio station services are not required to respond to Items 30–34.	utical e	n route	or	
29. Is the applicant a foreign government or the representative of any foreign government?	O Yes	s ⊚ N	0	
30. Is the applicant an alien or the representative of an alien?	O Yes	6 6 N	o o N	J/A
31. Is the applicant a corporation organized under the laws of any foreign government?	O Yes	s ⊚ N	о о ^N	J/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	6 N	o o N	I/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 ● N	To O 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.	○ Yes	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.	○ 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 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	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	⊘ 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.		

ect to a denial of Federal benefits that includes FO	either applicant nor any other party to the application is CC benefits pursuant to Section 5301 of the Anti–Drug Act of a for possession or distribution of a controlled substance. See oplication" for these purposes.	• Yes	O No
* *	nsed satellite to provide service in the United States? If Yes, nation specified in 47 C.F.R. 25.137, as appropriate. If No,	• Yes Exhibit B	No
. What administration has licensed or is in the production of the process of coordinating the sp	ocess of licensing the space station? If no license will be issued, pace station?	, what administ	ration has
	• 1	, , , , , , , , , , , , , , , , , , , ,	

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.)

This network includes a fixed earth station and a remote mobile (temporary fixed) earth station. Both units will operate within CONUS and only use U.S. Licensed Satellites (ALSAT). Services include video and data. All carriers will be digital.

Exhibit A

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.

true	rue, 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 t	o applicable response.)			
_	Individual Unincorporated Association				
Ō	O Partnership O Corporation				
Governmental EntityOther (please specify)					
	45. Name of Person Signing James Argiropoulos		46. Title of Person Sign Deputy Director of Info		
_	Please supply any need attachments. ttachment 1:	Attachment 2:		Attachment 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).

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: HUB E5. Call Sign:

E2: Contact Name James E6. Phone 312–746–9239

Argiropoulos Number:

E3. Street: 2111 W. Lexington E7. City: Chicago

E8. County: Cook

E4. State IL E9. Zip Code 60612

E10. Area of Operation: ALSAT

E11. Latitude: 41 °52 '20.0 "N

E12. Longitude: 87 °40 '45.0 "W

E13. Lat/Lon Coordinates are: NAD-27 NAD-83 N/A

E14. Site Elevation (AMSL): 185.0 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 No	O N/A
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 No	● N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	O Yes	s 💿	No
E18. Is frequency coordination required? If YES, attach a frequency coordination report as	O Yes	s 💿	No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	O Yes	s 💿	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.	O Yes	s 🔞	No
POINTS OF COMMUNICATION			
Satellite Name: ALSAT ALL AUTHORIZED U.S. ALSAT If you selected OTHER, please enter the followin	g:		

E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
POINTS OF COMMUNICATION (Destination Points)	
E25. Site Identifier: HUB	

E25. Site Identifier: HUB	
E26. Common Name:	E27. Country:USA

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 atGHz)
HUB	HUB-3.7	1	Andrew Corp.	3.7m Fixed ESA	3.7	51.6 dBi at 11.95
						52.8 dBi at 14.25

Id	Diameter	E35. Above Ground Level (meters)	(meters)		Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers (dBW)
HUB-3.7	0.0/0.0	5.0	190.0	0.0	47.7	0.0	71.6

FREQUENCY

E28. Antenna Id	E43/44.	E45. T/R Mode	E46. Antenna	E47. Emission	E48. Maximum	E49. Maximum
	Frequency Bands		Polarization(H,V,	Designator	EIRP per Carrier	ERIP Density per
	(MHz)		L , R)		(dBW)	Carrier
						(dBW/4kHz)

HUB-3.7	11700 12200	R	Horizontal and Vertical	4M0DGID	0.0	0.0
E50. Modulation entirety.)	and Services (If the	e complete description	on does not appear in	this box, please go to	the end of the form	to view it in its
QPSK, data	(digital)					
HUB-3.7	1400 14500	Т	Horizontal and Vertical	4M80GID	71.56	40.77
E50. Modulation entirety.) QPSK, data		ne complete description	on does not appear in	this box, please go to	o the end of the form	to view it in its

FREQUENCY COORDINATION

E28. Antenna Id	I	Frequency Limits(MHz)	Range of Satellite Arc E/W Limit	E56. Earth Station Azimuth Angle Eastern Limit	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)
HUB-3.7	Geostationary	11700 12200	74.0/ 125.0	160.06	39.67	228.85	28.65	0.0

	Geostationary	14000 14500	74.0/ 125.0	160.06		39.67	228.85	28.65	-64.0	
REMOTE CO	NTROL POIN	T LOCATION	•	•		•	•	•	•	
E61. Call Si	gn				E65	. Phone Number	•			
callsign for wh	NOTE: Please enter the callsign of the controlling station, not the callsign for which this application is being filed. E62. Street Address									
E63. City			E67. County	ý			E64/68. State/Country	E66	. Zip Code	

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: UNIFIED CMD E5. Call Sign:

VEHICLE

E2: Contact Name James E6. Phone 312–746–9239

Argiropoulos Number:

E3. Street: CONUS E7. City:

(Temporary Fixed)

E8. County:

E4. State E9. Zip Code

E10. Area of Operation: ALSAT

E11. Latitude: 0 °0 '0.0 "

E12. Longitude: 0 °0 '0.0 "

E13. Lat/Lon Coordinates are: NAD-27 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.	⊗ Ye	ès i	O No	O N/A
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 Ye	es i	O No	⊚ N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	O Y	Zes .	•	No
E18. Is frequency coordination required? If YES, attach a frequency coordination report as	O Y	/es	•	No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	O Y	Zes .	•	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.	1	/es	•	No
POINTS OF COMMUNICATION	-			
Satellite Name: ALSAT ALL AUTHORIZED U.S. ALSAT If you selected OTHER, please enter the following	g:			

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

POINTS OF COMMUNICATION (Destination Points)

E25. Site Identifier: UNIFIED CMD VEHICLE	
E26. Common Name:	E27. Country: USA

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 atGHz)
UNIFIED CMD VEHICLE	UCV-1	1	VERTEX RSI	1.5m SMK-LT	1.5	43.9 dBi at 11.95
						45.5 dBi at 14.25
	UCV-2		TRACSTAR SYSTEMS	MVS 960 SB	0.96	39.7 dBi at 11.95
						41.2 dBi at 14.25

E28. Antenna Id	E33/34. Diameter Minor/Major (meters)	E35. Above Ground Level (meters)	E36. Above Sea Level (meters)	E37. Building Height Above Ground Level (meters)	E38. Total Input Power at antenna flange (Watts)		E40. Total EIRP for al carriers (dBW)
UCV-1	0.0/0.0	6.0	0.0	4.0	39.8	2.0	64.0
UCV-2	0.0/0.0	5.5	0.0	4.0	20.0	1.5	61.0

FREQUENCY

E28. Antenna Id	E43/44. Frequency Bands (MHz)	E45. T/R Mode	E46. Antenna Polarization(H,V, L,R)	E47. Emission Designator	E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
UCV-1	11700 12200	R	Horizontal and Vertical	4M80GID	0.0	0.0
E50. Modulation entirety.) QPSK, data	(digital)	ne complete descrip	non does not appear n	i uns oox, picase go	to the end of the form	to view it in its
UCV-1	14000 14500	Т	Horizontal and Vertical	4M0DGID	64.0	34.0
E50. Modulation entirety.)	and Services (If the	he complete descrip	tion does not appear in	this box, please go	to the end of the form	to view it in its
QPSK, data	(digital)					
UCV-2	11700 12200	R	Horizontal and Vertical	4M80GID	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.)

QPSK, data (digital)

UCV-2	11700	Т	Horizontal and	4M0DGID	61.0	31.0
	12200		Vertical			

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.)

QPSK, data (digital)

FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	E54/55. Range of Satellite Arc E/W Limit	Station Azimuth Angle	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)
UCV-1	Geostationary	11700 12200	74.0/ 125.0	123.34	18.62	244.62	13.43	0.0
	Geostationary	14000 14500	74.0/ 125.0	123.34	18.62	244.62	13.43	-64.0

UCV-2	Geostationary	11700 12200	74.0/ 125.0	123.34	18.62	244.62	13.43	0.0
	Geostationary	14000 14500	74.0/ 125.0	123.34	18.62	244.62	13.43	-64.0

REMOTE CONTROL POINT LOCATION

E61. Call Sign	E65. Phone Number			
NOTE: Please enter the callsign of the contro callsign for which this application is being filed.				
E62. Street Address				
E63. City	E67. County		E64/68. State/Country	E66. Zip Code

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD–PERM, Paperwork Reduction Project (3060–0678), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to jboley@fcc.gov. PLEASE DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

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THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104–13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.