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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: OffSat3

01104110					
1–8. Lega	l Name of Ap	plicant			
	Name:	National Public Radio	Phone Number:	202–513–2653	
	DBA Name:		Fax Number:	202-513-3329	
	Street:	635 Massachusetts Avenue, NW	E-Mail:	Mmurphy@npr.org	
	City:	Washington	State:	DC	
	Country:	USA	Zipcode:	20001 -3753	
	Attention:	Mark Murphy			

Name:	Mark Murphy	Phone Number:	202-513-2632
Company:	National Public Radio	Fax Number:	202–513–3329
Street:	635 Massachusetts Avenue, NW	E–Mail:	mmurphy@npr.org
City:	Washington	State:	DC
Country:	USA	Zipcode:	20001-3753
Attention:	Mark Murphy	Relationship:	Engineer

CLASSIFICATION OF FILING

17. Choose the button next to the	b.
classification that applies to this filing for	b1. Application for License of New Station
both questions a. and b. Choose only one for 17a and only one for 17b.	b2. Application for Registration of New Domestic Receive–Only Station
for 17a and only one for 17b.	(N/A) b3. Amendment to a Pending Application
a.	(N/A) b4. Modification of License or Registration
a1. Earth Station	(N/A) b5. Assignment of License or Registration
(N/A) a2. Space Station	(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
	b b10. Other (Please specify)
	b 11. 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. Modification of Database Entry
17c. Is a fee submitted with this applicati	
• If Yes, complete and attach FCC Form	159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
O Governmental Entity O Noncomme	rcial educational licensee
Other(please explain): Public Radio H	Fee Exempt
-	
17d.	
Fee Classification BAX – Fixed Satellite T	ransmit/Receive Earth
Station	

18. If this filing is in reference to an	19. If this filing is an amendment to a pending ap	oplication enter:
existing station, enter:	(a) Date pending application was filed:	(b) File number of pending application:
(a) Call sign of station:		
Not Applicable	Not Applicable	Not Applicable

TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provide	e 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
	Using Non–U.S. licensed satellites
facilities:	ervice, 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 applicable frequency band(s).

x 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

a. Fixed Earth S	tation			
b. Temporary–F	ixed Earth Station			
c. 12/14 GHz V	SAT Network			
d. Mobile Earth	Station			
N/A) e. Geostation	ary Space Station			
	ationary Space Station			
g. Other (please	specify)			
PE OF EARTH S	TATION FACILITY: Choos	e only one		

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	• Yes	● ^{No}
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	RadHaz	
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?

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	● 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.	O Yes	No No ■

• Yes • No • N/A

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.	• 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	● 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.

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 No

Yes

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?

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.)

Temporary fixed earth station services at various locations throughtout the United States and its territories.

43a. Geographic Service Rule Certification By selecting A, the undersigned certifies that the applicant is not subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25.	● A
By selecting B, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will comply with such requirements.	О ^В
By selecting C, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will not comply with such requirements because it is not feasible as a technical matter to do so, or that, while technically feasible, such services would require so many compromises in satellite design and operation as to make it economically unreasonable. A narrative description and technical analysis demonstrating this claim are attached.	O C

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 butto	on next to applicable response	se.)		
O Individual				
• Unincorporated Association				
• Partnership				
• Corporation				
• Governmental Entity				
Other (please specify)				
Public Radio Fee Exempt				
45. Name of Person Signing		46. Title of Pers		
Peter J. Loewenstein		Vice President f	for Distribution	
47. Please supply any need attachments.				
Attachment 1:	Attachment 2:		Attachment 3:	
			BLE BY FINE AND / OR IMPRISO	
			FANY STATION AUTHORIZATION	[
(U.S. Code, Title 4)	7, Section 312(a)(1)), AND/6	UK FUKFEI I URE (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 St	ation Site				
E1: Site Identifier:	Offsat2	E5. Call Sign:			
E2: Contact Name	Mark Murphy	E6. Phone Number:	202-513-2632		
E3. Street:	Various	E7. City:	Various		
		E8. County:			
E4. State		E9. Zip Code			
E10. Area of Operat	tion:	Various locations th	roughtout the United	States and it's territories	
E11. Latitude:	0 °0 '0.0 "				
E12. Longitude:	0 °0 '0.0 "				
E13. Lat/Lon Coord	linates are:	O ^{NAD-27}	O 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	O ^{N₀}	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	○ ^{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	۲	No

E18. Is frequency coordination required? If YES, attach a frequency coordination report as	0	Yes	() N	10
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	0	Yes	() N	10
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	● ^N	10

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		Size <meters></meters>	E41/42. Antenna GainTransmint and/or Recieve (dBi at GHz)
Offsat2	OffSat1	1	Comtech	OFFSAT	5.5	45.9 dBi at 6.175

E28. Antenna Id	E33/34. Diameter Minor/Major (meters)	E35. Above Ground Level (meters)	E36. Above Sea Level (meters)	Height Above Ground	Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers (dBW)
OffSat1	0.0/0.0	12.0	0.0	0.0	350.0	0.0	71.34

FREQUENCY

	E43/44. Frequency Bands (MHz)	E45. T/R Mode			E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
OffSat1	5925 6425	Т	Horizontal and Vertical	180KF3F	58.53	42.0

E50. Modulation entirety.)	and Service	s (If tl	ne complete descripti	on does not appear ir	n this box, please go t	to the end of the form	to view it in its
Analog SCE	ΡĊ						
OffSat1	5925	6425	Т	Horizontal and Vertical	30K0F1D	51.95	43.2
E50. Modulation entirety.)	and Service	s (If tl	ne complete descripti	on does not appear in	n this box, please go t	to the end of the form	to view it in its
Digital SC	PC						
OffSat1	5925	6425	Т	Horizontal and Vertical	1M85G7W	60.06	33.4
E50. Modulation entirety.)	and Service	s (If tl	ne complete descripti	on does not appear ir	n this box, please go t	to the end of the form	to view it in its
Digital T1	. Carrier						
OffSat1	5925	6425	Т	Horizontal and Vertical	36M0G7W	71.34	31.8

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.)

Digital traffic, various information, various data rates, various FEC

	1						
OffSat1	5925	6425	Т	Horizontal and	51K2G7W	44.47	33.4
				Vartical			
				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.)

Digital traffic, various information, various data rates, various FEC

FREQUENCY COORDINATION

	E51. Satellite Orbit Type	Frequency	E54/55. Range of Satellite Arc E/W Limit	E56. Earth Station Azimuth Angle Eastern Limit		Station Azimuth Angle	E59. Antenna Elevation Angle Western Limit	E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
OffSat1	Geostationary	5925 6425	58.0/ 143.0	0.0	5.0	0.0	5.0	11.0

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

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