

FCC 312

Schedule B

FEDERAL COMMUNICATIONS COMMISSION

APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS

Technical and Operational Description

(Place an "X" in one of the blocks below)

- License of New Station
- Registration of new Domestic Receive-Only Station
- Amendment to a Pending Application
- Modification of License/Registration
- Notification of Minor Modification

B1. Location of Earth Station Site. If temporary-fixed, mobile, or VSAT remote facility, specify area of operation and point of contact. If VSAT hub station, give its location. For VSAT networks attach individual Schedule B, Page 1 sheets for each hub station and each remote station. Individually provide the Location, Points of Communications, and Destination Points for each hub and remote station.

NO CHANGE TO INFORMATION IN CURRENT LICENSE

B2. Points of Communications: List the names and orbit locations of all satellites with which this earth station will communicate. The entry "ALSAT" is sufficient to identify the names and locations of all satellite facilities licensed by the U.S. All non-U.S. licensed satellites must be listed individually.

Satellite Name and Orbit Location
1)
2)
3) NO CHANGE TO INFORMATION IN CURRENT LICENSE
4)
5) to All authorized U.S. Domestic (ALSAT) Satellites

B3. Destination points for communications using non-U.S. licensed satellites. For each non-U.S. licensed satellite facility identified in section B2 above, specify the destination point(s) (countries) where the services will be provided by this earth station via each non-U.S. license satellite system. Use additional sheets as needed.

Satellite Name	List of Destination Points
NOT APPLICABLE/ NO CHANGE TO INFORMATION IN CURRENT LICENSE	

**FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
FCC Form 312 - Schedule B: (Technical and Operational Description)**

B4. Earth Station Antenna Facilities: Use additional pages as needed.

(a) Site ID*	(b) Antenna ID**	(c) Quantity	(d) Manufacturer	(e) Model	(f) Antenna Size (meters)	(g) Antenna Gain Transmit and/or Receive (____ dBi at ____ GHz)
NO CHANGE TO INFORMATION IN CURRENT LICENSE						

B5. Antenna Heights and Maximum Power Limits: (The corresponding Antenna ID in tables B4 and B5 applies to the same antenna)

(a) Antenna ID**	(b) Antenna Structure Registration No.	Maximum Antenna Height		(e) Building Height Above Ground Level (meters)***	(f) Maximum Antenna Height Above Rooftop (meters)***	(g) Total Input Power at antenna flange (Watts)	(h) Total EIRP for all carriers (dBW)
		(c) Above Ground Level (meters)	(d) Above Mean Sea Level (meters)				
NO CHANGE TO INFORMATION IN CURRENT LICENSE							

- Notes: * If this is an application for a VSAT network, identify the site (Item B1b, Schedule B, Page 1) where each antenna is located. Also include this Site-ID on Schedule B, Page 5.
 ** Identify each antenna in VSAT network or multi-antenna station with a unique identifier, such as HUB, REMOTE1, A1, A2, 10M, 12M, 7M, etc. Use this same antenna ID throughout tables B4, B5, B6, and B7 when referring to the same antenna.
 *** Attach sketch of site or exemption, See 47 CFR Part 17.

**FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
FCC Form 312 - Schedule B: (Technical and Operational Description)**

B6. Frequency Coordination Limits: Use additional pages as needed.

#	(a) Antenna ID*	(b) Frequency Limits (MHz)	(c) Range of Satellite Arc Eastern Limit**	(d) Range of Satellite Arc Western Limit**	(e) Antenna Elevation Angle Eastern Limit	(f) Antenna Elevation Angle Western Limit	(g) Earth Station Azimuth Angle Eastern Limit	(h) Earth Station Azimuth Angle Western Limit	(i) Maximum EIRP Density toward the Horizon (dBW/4kHz)
NO CHANGE TO INFORMATION IN CURRENT LICENSE									

- Notes: * Provide the ANTENNA-ID from table B4 to identify the antenna to which each frequency band and orbital arc range is associated.
 ** If operating with geostationary satellites, give the orbital arc limits and the associated elevation and azimuth angles. If operating with non-geostationary satellites, give the notation "NON-GEO" for the satellite arc and give the minimum operational elevation angle and the maximum azimuth angle range.

**FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
FCC Form 312 - Schedule B: (Technical and Operational Description)**

B7. Particulars of Operation (Full particulars are required for each r.f. carrier): Use additional pages as needed.

(a) Antenna ID*	(b) Frequency Limits (MHz)	(c) T/R Mode **	(d) Antenna Polarization (H,V,L,R)	(e) Emission Designator	(f) Maximum EIRP per Carrier (dBW)	(g) Maximum EIRP Density per Carrier (dBW/4kHz)	(h) Description of Modulation and Services
ADD THE FOLLOWING TO INFORMATION IN CURRENT LICENSE							
1	5925-6425	T	H,V,L,R	256KG7W	65.56	47.5	Digital data, video or voice
1	5925-6425	T	H,V,L,R	36M0G7W	79.04	39.5	Digital data, video or voice
1	5925-6425	T	H,V,L,R	72M0G7W	79.05	36.5	Digital data, video or voice
1	3700-4200	R	H,V,L,R	256KG7W	-	-	Digital data, video or voice
1	3700-4200	R	H,V,L,R	36M0G7W	-	-	Digital data, video or voice
1	3700-4200	R	H,V,L,R	72M0G7W	-	-	Digital data, video or voice

Notes: * Provide the ANTENNA-ID from table B4 to identify the antenna to which each frequency band and emission is associated. For VSAT networks, include frequencies and emissions for all HUB and REMOTE units.
 ** Indicate whether the earth station transmits or receives in each frequency band.

**FEDERAL COMMUNICATIONS COMMISSION
 APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
 FCC Form 312 - Schedule B: (Technical and Operational Description)**

If VSAT Network, provide the SITE-ID (Item B1b) of the station that B8-B13 are in response to (HUB, REMOTE1, etc.): _____

B8. 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 measurements? If NO, provide as an exhibit, a technical analysis showing compliance with two-degree spacing policy.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO												
B9. 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 measurement?	<input type="checkbox"/> YES	<input type="checkbox"/> NO												
B10. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO												
Remote Control Point Location:														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="4" style="padding: 2px;">B10a. Street Address</td> </tr> <tr> <td style="width:33%; padding: 2px;">B10b. City</td> <td style="width:25%; padding: 2px;">B10c. County</td> <td style="width:25%; padding: 2px;">B10.d. State/Country</td> <td style="width:17%; padding: 2px;">B10e. Zip Code</td> </tr> <tr> <td colspan="2" style="padding: 2px;">B10f. Telephone Number</td> <td colspan="2" style="padding: 2px;">B10g. Call Sign of Control Station (if appropriate)</td> </tr> </table>			B10a. Street Address				B10b. City	B10c. County	B10.d. State/Country	B10e. Zip Code	B10f. Telephone Number		B10g. Call Sign of Control Station (if appropriate)	
B10a. Street Address														
B10b. City	B10c. County	B10.d. State/Country	B10e. Zip Code											
B10f. Telephone Number		B10g. Call Sign of Control Station (if appropriate)												
B11. Is frequency coordination required? If YES, attach a frequency coordination report as an exhibit.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO												
B12. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as an exhibit.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO												
B13. FAA Notification - (See 47 CFT Part 17 and 47 CFT 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 CFT PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO												