Date & Time Filed: Sep 21 2018 5:39:09:176PM File Number: SES-MFS-20180921-02789

FCC APPLICATION FOR SPACE AND EARTH STATION:MOD OR AMD - MAIN FORM	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: E010016 mod to add T18Vantage 091718

E010010 III0d to ddd	110 vantage 071710		
1–8. Legal Name of Ap	plicant		
Name:	Hawaii Pacific Teleport, L.P.	Phone Number:	808-674-9157
DBA Name:		Fax Number:	808-674-1826
Street:	P.O. Box 429	E-Mail:	lsmith-ryland@hawaiiteleport. com
City:	Makawao	State:	НІ
Country:	USA	Zipcode:	96768 –
Attention:	Ms Leeana A Smith-Ryland		

9–16. Name of Contact Representative

Name: Joseph A. Godles Phone Number: 202–429–4900

Company: Goldberg, Godles, Wiener & Fax Number:

Wright LLP

Street: 1025 Connecticut Ave, NW E-Mail: jgodles@g2w2.com

Ste 1000

City: Washington State: DC

Country: USA Zipcode: 20036–

Attention: Relationship: Other

**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.	(N/A) b1. Application for License of New Station (N/A) b2. Application for Registration of New Domestic Receive—Only Station b3. Amendment to a Pending Application
a1. Earth Station a2. Space Station	<ul> <li>b4. Modification of License or Registration</li> <li>b5. Assignment of License or Registration</li> <li>b6. Transfer of Control of License or Registration</li> <li>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>(N/A) b10. Other (Please specify)</li> <li>(N/A) 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</li> <li>(N/A) b12. Application for Database Entry</li> <li>b13. Amendment to a Pending Database Entry Application</li> <li>b14. Modification of Database Entry</li> </ul>
17c. Is a fee submitted with this application of the submitted with th	159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
17d.  Fee Classification CGX – Fixed Satellite T Station	Transmit/Receive Earth

18. If this filing is in reference to an existing station, enter:	_	ling is an amendment to a pending application enter both fields, if this filing is a n please enter only the file number:			
(a) Call sign of station:	(a) Date pending application	on was filed:	(b) File number:		
E010016			CECMOD2019022900202		
			SESMOD2018032800292		
TYPE OF SERVICE					
20. NATURE OF SERVICE: This filing is f	For an authorization to provid	e or use the followi	ng 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: Chaosa the button payt to the	annliaghla status. Chagas	22 If conth station	applicant shock all that apply		
21. STATUS: Choose the button next to the only one.	applicable status. Ci100se	1	a applicant, check all that apply.		
Common Carrier Non–Common Carrier					
<del>*</del>		■ Using Non–U	.b. neembed batemites		

23. If applicant is providing INTERNATIONAL COMMON CARRIER 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

facilities:

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: (Please specify additional frequencies in an attachment)				
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				
• e. Geostationary Space Station				
f. Non–Geostationary Space Station				
g. Other (please specify)				
26. TYPE OF EARTH STATION FACILITY:				
Transmit/Receive Transmit—Only Receive—Only N/A				
"For Space Station applications, select 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.)
a — authorization to add new emission designator and related service
b — authorization to change emission designator and related service
c — authorization to increase EIRP and EIRP density
d — authorization to replace antenna
e — authorization to add antenna
f — authorization to relocate fixed station
g — authorization to change frequency(ies)
h — authorization to add frequency
i — authorization to add Points of Communication (satellites & Double
j — authorization to change Points of Communication (satellites & Double of Communication)
k — authorization for facilities for which environmental assessment and
radiation hazard reporting is required
1 — authorization to change orbit location
m — authorization to perform fleet management
n — authorization to extend milestones
o — Other (Please specify)

#### **ENVIRONMENTAL POLICY**

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.	•	Rad	Ha	,	tudy	7	
ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aeron aeronautical fixed radio station services are not required to respond to Items 30–34.	autic	al e	n rc	oute	e or		
29. Is the applicant a foreign government or the representative of any foreign government?	0	Yes	. (	∌	No		
30. Is the applicant an alien or the representative of an alien?	0	Yes	• (	>	No	•	N/A
31. Is the applicant a corporation organized under the laws of any foreign government?	0	Yes	-	_ >	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?	0	Yes	. (	_ >	No	•	N/A

O Yes O No

28. Would a Commission grant of any proposal in this application or amendment have a significant environmental

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.	<b>o</b> 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

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	<b>⊚</b> 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	• 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.	• Yes	<b>⊘</b> 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	O 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.	Yes  Exhibit 1 Narr	O No
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued coordinated or is in the process of coordinating the space station? Tonga	, what administr	ration has
43. Description. (Summarize the nature of the application and the services to be provided). (If the complete describox, please go to the end of the form to view it in its entirety.)  Modification to add Telstar 18 VANTAGE as point of communication for servithe 9.3m 2d antenna		

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.	<b>●</b> 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.	O B
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.	<b>o</b> 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 button next to applicable response.)	
o Individual	
O Unincorporated Association	
Partnership	
Corporation	
Governmental Entity	
Other (please specify)	
45. Name of Person Signing	46. Title of Person Signing
Leeana Smith–Ryland	Chief Executive Officer
>	
(U.S. Code, Title 18, Section 1001), AND/OR R	ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT EVOCATION OF ANY STATION AUTHORIZATION 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: 1 E5. Call Sign: E010016

E2: Contact Name Leena Ryland— E6. Phone 917–750–5358

Smith Number:

E3. Street: 91–340 E7. City: KAPOLEI

FARRINGTON HIGHWAY

E8. County: HONOLULU

E4. State HI E9. Zip Code 96707

E10. Area of Operation: CONUS

E11. Latitude: 21 °20 '8.0 "N

E12. Longitude: 158 °5 '25.0 "W

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

E14. Site Elevation (AMSL): 36.57 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.	<b>⊚</b> 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	<b>⊚</b> N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	O Yes	•	No
	-1		
E18. Is frequency coordination required? If YES, attach a frequency coordination report as Exhibit 4 Freq Coord	Yes	• 0	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	•	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	•	No
POINTS OF COMMUNICATION			
Satellite Name: OTHER   OTHER   If you selected OTHER, please enter the following:			

E21. Common Name: TELSTAR 18 VANTAGE	E22. ITU Name: TONGASAT-2/138E
E23. Orbit Location: 138 EL	E24. Country: Tonga
DOINTER OF COMMINICATION (D. 41 41 D. 14)	

#### 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 Gain Transmint and/or Recieve (dBi atGHz)	
1	9.3–2nd	1	Andrew Corp	ESA9.3-46	9.3	50.7 dBi at 4.0	
1	9.3–2nd	1	Andrew Corp	ESA9.3-46	9.3	53.9 dBi at 6.0	

- 1	[d	Diameter		, ,	Height Above	Input Power at	E39. Maximum Antenna Height Above Rooftop (meters)	EIRP for al
٥	9.3–2nd	0.0/0.0	10.0	46.57	0.0	100.0	0.0	73.9

# FREQUENCY

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

9.3–2nd	3622.7 3623.3	R	Horizontal and Vertical	600KG7D	0.0	0.0
E50. Modulation entirety.)	and Services (If	the complete de	escription does not appear	in this box, please	go to the end of th	ne form to view it in its
Telemetry	using BPSK mc	ndulation				
9.3–2nd	3624.7 3625.3	R	Horizontal and Vertical	600KG7D	0.0	0.0
Telemetry	using BPSK mc	dulation				
9.3–2nd	6646.5 6647.5	Т	Horizontal and Vertical	1M00F2D	67.22	43.24
E50. Modulation entirety.)	and Services (If	the complete de	escription does not appear	in this box, please	go to the end of th	ne form to view it in its
Command ca	arrier using F	requency M	odulation			

9.3–2nd	6648.5 6649.5	Т	Horizontal and Vertical	1M00F2D	67.22	43.24
E50. Modulatio entirety.)	n and Services (If the	ne complete descrip	otion does not appear	in this box, please	go to the end of the	ne form to view it in its
Command c	arrier using Fr	requency Modul	lation			
9.3–2nd	5850 5925	Т	Horizontal and Vertical	100KG1D	54.5	40.52
Digital	ervice carriers	, WICH H FOR II	MOUNTACTOIL (VI.	or, ordit, coo		
9.3–2nd	3700 4200	R	Horizontal and Vertical	600KG7D	0.0	0.0
E50. Modulation entirety.)  Telemetry 8PSK, etc	using BPSK mod		••			ne form to view it in its

9.3–2nd	5925	6425	T	Horizontal and	600KF2D	65.0	43.24
				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.)

Command carrier using Frequency Modulation; Digital service carriers with n-PSK modulation (QPSK, 8PSK, etc)

## FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	E54/55. Range of Satellite Arc Eastern/West ern 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)
9.3–2nd	Geostationary	3700 4200	138.0/138.0	259.9	15.8	259.9	15.8	0.0
	Geostationary	5850 5925	138.0/138.0	259.9	15.8	259.9	15.8	-14.37
	Geostationary	5925 6425	138.0/138.0	259.9	15.8	259.9	15.8	-11.65
	Geostationary	3622.7 3623.3	138.0/138.0	259.9	15.8	259.9	15.8	0.0
	Geostationary	3624.7 3625.3	138.0/138.0	259.9	15.8	259.9	15.8	0.0
	Geostationary	6646.5 6647.5	138.0/138.0	259.9	15.8	259.9	15.8	-11.65

	Geostationary	6648.5 6649.5	138.0/138.0	259.9	15.8	259.9	15.8	-11.65		
REMOTE CO	NTROL POIN	T LOCATION	•			•	•	•		
E61. Call Si	gn				E66. Phone Nur	mber				
callsign for whi	NOTE: Please enter the callsign of the controlling station, not the callsign for which this application is being filed.									
E62. Street A	Address									
E63. City			E68. County	y		E67/68. State/Count	try	E64. Zip Code		

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