Date & Time Filed: Feb 25 2004 4:20:32:570PM File Number: SES-MOD-INTR2004-00380

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:

# CDF09 MOD FOR 70W

1–8. Legal Name of Applicant						
	Name:	DIRECTV Enterprises, LLC	Phone Number:	310–726–4993		
	DBA Name:		Fax Number:	310–535–5323		
	Street:	2230 E. Imperial Hwy	E–Mail:	salozano@directv.com		
	City:	El Segundo	State:	CA		
	<b>Country:</b>	USA	Zipcode:	90245 –		
	Attention:	Sal Lozano				

9–16. Name of Contact Representative (If other than applicant)

Name: James H Barker Esq. Phone Number: 202–637–2231

**Company:** Latham and Watkins **Fax Number:** 202–637–2201

Street: 555 11th Street E–Mail: jim.barker@lw.com

City: Washington State: DC

**Country:** USA **Zipcode:** 20004–1304

**Contact** Attornery at Law **Relationship:** Legal Counsel

Title:

for 17a and only one for 17b.

a1. Earth Station

a2. Space Station

#### **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 both questions a. and b. Choose only one (N/A) b1. Application for License of New Station (N/A) 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

b5. Assignment of License or Registration

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

(N/A) b10. Other (Please specify)

17c. Is a fee submitted with this application?  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):						
17d.						
Fee Classification A CGX – Fixed Satellite Station	Fee Classification A CGX – Fixed Satellite Transmit/Receive Earth Station					
18. If this filing is in reference to an existing station, enter:	19. If this filing is an amendment to a pending a modification please enter only the file number:	application enter both fields, if this filing is a				
(a) Call sign of station: (a) Date pending application was filed: (b) File number:						
E930304		SESMOD2003100301366				

# 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
Common Carrier Non–Common Carrier	Using Non–U.S. licensed satellites
23. If applicant is providing INTERNATIONAL COMMON CARRIER s facilities:	ervice, see instructions regarding Sec. 214 filings. Choose one. Are these
O 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) b. Ku–Band (12/14 GHz)	
c.Other (Please specify upper and lower frequencies in MHz.)	
Frequency Lower: Frequency Upper: (Please specify addition	nal 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 & mp; countries)
j — authorization to change Points of Communication (satellites & Double of Communication (satellites & Doub
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**

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.						
ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aeronateronautical fixed radio station services are not required to respond to Items 30–34.	autic	al en	rout	te or		
29. Is the applicant a foreign government or the representative of any foreign government?	٥	Yes	•	No	0	N/A
30. Is the applicant an alien or the representative of an alien?	0	Yes	0	No	•	N/A
31. Is the applicant a corporation organized under the laws of any foreign government?	0	Yes	0	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?	٥	Yes	0	No	•	N/A

O Yes O No

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

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.	O Yes	No
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued, we coordinated or is in the process of coordinating the space station?USA	hat administr	ration has
43. Description. (Summarize the nature of the application and the services to be provided). (If the complete descripti box, please go to the end of the form to view it in its entirety.)	on does not a	ppear in this
This application requests modification to add the following points of commun	ication	

#### **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,	complete and correct to the best of his or he	r knowledge and belief	, and are made in good fa	aith.			
44. /	Applicant is a (an): (Choose the button next t	o applicable response.)					
0000	Individual Unincorporated Association Partnership Corporation Governmental Entity Other (please specify)						
	45. Name of Person Signing fames Butterworth		46. Title of Person Sigr Senior Vice–President	ning			
_	Please supply any need attachments. tachment 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: CRBC E5. Call Sign: E930304 E2: Contact Name Don Jones E6. Phone 303-660-7001 Number: E3. Street: 5454 Garton Rd. E7. City: Castle Rock E8. County: Douglas E9. Zip Code 80104 E4. State CO E10. Area of Operation: N/A 39 °16 '37.0 "N E11. Latitude: E12. Longitude: 104 °48 '29.0 "W E13. Lat/Lon Coordinates are: NAD-27 **⋒** NAD-83 N/A E14. Site Elevation (AMSL): 2096.77 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.

E18. Is frequency coordination required? If YES, attach a frequency coordination report as cdf09Final  E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as  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.  POINTS OF COMMUNICATION  Satellite Name: OTHER If you selected OTHER, please enter the following:  E21. Common Name: DIRECTV 5  E22. ITU Name: USABSS7A	E16. If the proposed antenna(s) do not operate in the Fixed Satellite Set Satellite Service (FSS) with non–geostationary satellites, do(es) the progain patterns specified in Section 25.209(a2) and (b) as demonstrated by measurements?	posed antenna(s) comply with the antenna	O Yes	O No	<b>⊚</b> N/A
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as  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.  POINTS OF COMMUNICATION  Satellite Name: OTHER If you selected OTHER, please enter the following:  E21. Common Name: DIRECTV 5  E22. ITU Name: USABSS7A	E17. Is the facility operated by remote control? If YES, provide the loca point.	tion and telephone number of the control	O Yes	•	No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as  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.  POINTS OF COMMUNICATION  Satellite Name: OTHER If you selected OTHER, please enter the following:  E21. Common Name: DIRECTV 5  E22. ITU Name: USABSS7A	E18. Is frequency coordination required? If YES, attach a frequency coordination	ordination report as cdf09Final			
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.  POINTS OF COMMUNICATION  Satellite Name: OTHER If you selected OTHER, please enter the following:  E21. Common Name: DIRECTV 5  E22. ITU Name: USABSS7A		1	Yes	٥	No
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.  POINTS OF COMMUNICATION  Satellite Name: OTHER If you selected OTHER, please enter the following:  E21. Common Name: DIRECTV 5  E22. ITU Name: USABSS7A	E19. Is coordination with another country required? If YES, attach the recoordination contours as	name of the country(ies) and plot of	O Yes	•	No
Satellite Name: OTHER If you selected OTHER, please enter the following:  E21. Common Name: DIRECTV 5  E22. ITU Name: USABSS7A	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?				No
E21. Common Name: DIRECTV 5 E22. ITU Name: USABSS7A	POINTS OF COMMUNICATION		•		
	Satellite Name: OTHER If you selected OTHER, please enter the	following:			
E23. Orbit Location: 72.5 W E24. Country: USA	E21. Common Name: DIRECTV 5	E22. ITU Name: USABSS7A			
	E23. Orbit Location: 72.5 W	E24. Country: USA	_		_

OTHER If you selected OTHER, please enter the following:

Satellite Name:

E23. Orbit Location: 119 W	E24 Country: USA						
	E24. Country: USA						
Satellite Name: OTHER If you selected OTHER, please enter the following:							
E21. Common Name: DIRECTV 3	E22. ITU Name: USABSS2A						
E23. Orbit Location: 101 W	E24. Country: USA						
Satellite Name: OTHER If you selected OTHER, please ento	er the following:						
E21. Common Name: DIRECTV 1R	E22. ITU Name: USABSS1R						
E23. Orbit Location: 101 W	E24. Country: USA						
Satellite Name: OTHER If you selected OTHER, please enter the following:							
E21. Common Name: DIRECTV 3	E22. ITU Name: USABSS2A						
E23. Orbit Location: 82 W	E24. Country: USA						
Satellite Name: OTHER If you selected OTHER, please ento							
E21. Common Name: DIRECTV 7S	E22. ITU Name: USABSS18						
E23. Orbit Location: 119 W	E24. Country: USA						
Satellite Name: OTHER If you selected OTHER, please ento	er the following:						
E21. Common Name: DIRECTV 6	E22. ITU Name: USABSS11						
E23. Orbit Location: 110 W	E24. Country: USA						
E25. Offit Location: 110 W	E24. Country: USA						

E21. Common Name: DIRECTV 4S	E22. ITU Name: USABSS13
E23. Orbit Location: 101 W	E24. Country: USA

Satellite Name: OTHER If you selected OTHER, please enter the fo	If you selected OTHER, please enter the following:				
E21. Common Name: DIRECTV 2	E22. ITU Name: USABSS2				
E23. Orbit Location: 101 W	E24. Country: USA				

Satellite Name: OTHER If you selected OTHER, please enter the fe	If you selected OTHER, please enter the following:				
E21. Common Name: DIRECTV 1	E22. ITU Name: USABSS1M				
E23. Orbit Location: 101 W	E24. Country: USA				

# 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)
CRBC	CDF09	1	VERTEXRSI	13.1KPKDBS	13.1	62.5 dBi at 12.2
						65.3 dBi at 17.3

Id	Diameter		` ′	Height Above	Input Power at	E39. Maximum Antenna Height Above Rooftop (meters)	EIRP for al
CDF09	13.1/13.1	13.7	2110.4	0.0	436.0	0.0	91.4

# FREQUENCY

	E43/44. Frequency Bands (MHz)	E45. T/R Mode			E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
CDF09	12200 12700	R	Left and Right Circular	25M0M1F	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 digital audio/video

CDF09	12200	R	Left and Right	3M20F3X	0.0	0.0
	12700		Circular			

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.)

FM Digital Data and Video

12200 12700	R	Left and Right Circular	82K0F3N	0.0	0.0
and Services (If the	ne complete descripti	on does not appear i	n this box, please go	to the end of the for	m to view it in its
carrier, no d	lata				
12200 12700	R	Left and Right Circular	750KF2D	0.0	0.0
Carrier, digi	tal data				
17300 17800	Т	Left and Right Circular	25M0M1F	87.4	49.4
		on does not appear i	In this box, please go	to the end of the for	m to view it in its
	and Services (If the carrier, no decarrier, no decarrier, no decarrier, no decarrier, no decarrier, diginal services (If the carrier, diginal services (If the carrier) and Services (If the carrier) (If the carr	and Services (If the complete description carrier, no data  12200 R 12700 R 12700 and Services (If the complete description carrier, digital data)  17300 T 17800 T	and Services (If the complete description does not appear in a carrier, no data    12200	and Services (If the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box, please government of the complete description does not appear in this box.	and Services (If the complete description does not appear in this box, please go to the end of the for carrier, no data    12200

CDF09	17300 17800	Т	Left and Right Circular	3M20F3X	87.4	58.4
E50. Modulati entirety.)	ion and Services (	(If the complete d	lescription does not appear	in this box, please	go to the end of the	he form to view it in its
FM Digit	al Data and V	ideo				
CDF09	17300 17800	Т	Left and Right Circular	82K0F3N	87.3	74.2
entirety.)  FM Comma	nd carrier, n	o data				
CDF09	17300 17800	Т	Left and Right Circular	750KF2D	87.4	64.7
entirety.)	nd Carrier, d	· •	lescription does not appear	in this box, please	go to the end of the	ne form to view it in its

FREQUENCY COORDINATION

E28. Antenna Id			Range of Satellite Arc	Station Azimuth Angle	E57. Antenna Elevation Angle Eastern Limit	Station Azimuth Angle		E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
CDF09	Geostationary	17300 17800	70.0/140.0	132.3	32.1	228.1	31.9	4.2

# REMOTE CONTROL POINT LOCATION

E61. Call Sign		E66. Phone Number		
NOTE: Please enter the callsign of the controlling station, not the callsign for which this application is being filed.				
E62. Street Address				
E63. City	E68. County		E67/68. State/Country	E64. Zip Code

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