Date & Time Filed: Sep 24 2004 4:08:53:176PM File Number: SES-MOD-INTR2004-01986

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: Modification to E000361

gal Name of Ap	pplicant		
Name:	Skyport International, Inc.	Phone Number:	281–272–7512
DBA Name:		Fax Number:	281–999–4455
Street:	2 Northpoint Drive	E-Mail:	mbatson@x-analog.com
	Ste. 230		
City:	Houston	State:	TX
Country:	USA	Zipcode:	77060 –
Attention:	Mr Charles Stack		

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

Name: Michael Batson Phone Number: 409–925–4702

Company: X-Analog Communications, Inc. **Fax Number:** 409–925–4601

Street: 1835 Algoa Friendswood Rd E-Mail: mbatson@x-analog.com

City: Alvin State: TX

Country: USA Zipcode: 77511–

Contact Systems Engineer **Relationship:** Engineer

Title:

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 (N/A) b2. Application for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies to this filing for (N/A) b3. Amendment of the classification that applies the classification that applies to the classification that applies the classificatio

a1. Earth Station

a2. Space Station

(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). Governmental Entity Noncommercial educational licensee					
Other(please explain):					
17d.					
Fee Classification 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:	pplication enter both fields, if this filing is a			
(a) Call sign of station:	(a) Date pending application was filed:	(b) File number:			
E000361		SESMOD2003081301133			

TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provide of	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)	
	2. 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 ser facilities:	vice, see instructions regarding Sec. 214 filings. Choose one. Are these
Connected to a Public Switched Network Not connected to a Public Switched Network	blic Switched Network N/A
24. FREQUENCY BAND(S): Place an 'X' in the box(es) next to all app	licable 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	l 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

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.	Yes No Exhibit A – Rad Haz

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 O No O N/A
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 O 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?	0	Yes	•	No	٥	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?	0	Yes	•	No	٥	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.		0	Yes	€) No	Ο
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.		0`	Yes	•	, No	0

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 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	⊘ 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?	/hat administr	ration has

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 application is for authorization to add a 6.3-meter transmit/receive antenna to Skyport's existing teleport (which currently has a licensed 13.1-meter C-Band antenna). A Radiation Hazard Analysis is attached in Exhibit A, and the Power Density Calculations are attached in Exhibit B.

Exhibit B – Pwr Dens

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.

uuc,	complete and correct to the best of his of her knowledge and t	bener, and are made in good rain.	
44. /	Applicant is a (an): (Choose the button next to applicable response	onse.)	
0000	dividual nincorporated Association artnership orporation overnmental Entity ther (please specify)		
	25. Name of Person Signing Charles Stack >	46. Title of Person Signing CTO	

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 St	ation Site					
E1: Site Identifier:	EFT	E5. Call Sign:	E000361			
E2: Contact Name	Chuck Fetty	E6. Phone Number:	832-448-1030			
E3. Street:	11140 Aerospace Ave.	E7. City:	Houston			
		E8. County:	Harris			
E4. State	TX	E9. Zip Code	77034			
E10. Area of Operat	tion:	Houston				
E11. Latitude:	29 °6 '35.5 "N					
E12. Longitude:	95 °0 '29.7 "W					
E13. Lat/Lon Coord	linates are:	O NAD-27	● NAD-83	O N/A		
E14. Site Elevation	(AMSL):	113.0 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.

E16. If the proposed antenna(s) do not operate in the Fixed Satellite Se Satellite Service (FSS) with non–geostationary satellites, do(es) the progain patterns specified in Section 25.209(a2) and (b) as demonstrated by measurements?	O Yes	O No	⊚ N/A	
E17. Is the facility operated by remote control? If YES, provide the location.	ntion and telephone number of the control	O Yes	0	No
E18. Is frequency coordination required? If YES, attach a frequency coordination	ordination report as	O Yes	•	No
E19. Is coordination with another country required? If YES, attach the r coordination contours as	name of the country(ies) and plot of	O Yes	•	No
E20. FAA Notification – (See 47 CFR Part 17 and 47 CFR part 25.1 have you attached a copy of a completed FCC Form 854 and/or the FAA the structure to aviation? FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL APPLICATION.	A's study regarding the potential hazard of	O Yes	•	No
POINTS OF COMMUNICATION		1		
Satellite Name: PERMITTED LIST If you selected OTHER, pleas	se enter the following:			
E21. Common Name:	E22. ITU Name:			
E23. Orbit Location:	E24. Country:			
POINTS OF COMMUNICATION (Destination Points)				
E25. Site Identifier: EFT				

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)
EFT	0	0	0	0	0.0	0.0 dBi at
	6.3-m Hub	1	Vertex	KXC	6.3	46.3 dBi at 3.925
						50.3 dBi at 6.175

E28. Antenna Id	Diameter		` ′	Height Above Ground Level	Input Power at antenna flange	E39. Maximum Antenna Height Above Rooftop (meters)	EIRP for al
0	0.0/0.0	0.0	0.0	0.0	0.0	0.0	0.0
6.3-m Hub	0.0/0.0	8.0	19.3	0.0	63.0	0.0	66.4

FREQUENCY

E28. Antenna Id	E43/44. Frequency Bands (MHz)	E45. T/R Mode		Designator	EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
6.3-m Hub	3700 4200	R	Horizontal and Vertical	2M00G7W	0.0	0.0

E50. Modulation entirety.)	and Services	(If th	ne complete description	on does not appear in	this box, please go to	o the end of the form	to view it in its	
Digital QP	SK (SCPC	compr	essed digital	data / video)				
6.3-m Hub	3700	4200	R	Horizontal and Vertical	5M00G7W	0.0	0.0	
entirety.)	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 QPSK (SCPC compressed digital data / video)							
6.3-m Hub	5925	6425	Т	Horizontal and Vertical	2M00G7W	62.3	37.4	
E50. Modulation entirety.)	and Services	(If th	ne complete description	on does not appear in	this box, please go to	o the end of the form	to view it in its	
Digital QP	SK (SCPC	compr	essed digital	data / video)				
6.3-m Hub	5925	6425	Т	Horizontal and Vertical	5M00G7W	66.4	37.4	

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 QPSK (SCPC compressed digital data / video)

FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	E54/55. Range of Satellite Arc Eastern/West ern Limit	Station Azimuth Angle	E57. Antenna Elevation Angle Eastern Limit	Station Azimuth Angle		E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
6.3-m Hub	Geostationary	3700 4200	21.0/143.0	98.0	5.0	245.9	28.0	-1.4
	Geostationary	5925 6425	21.0/143.0	98.0	5.0	245.9	28.0	-1.4

REMOTE CONTROL POINT LOCATION

E61. Call Sign	E66. Phone Number			
NOTE: Please enter the callsign of the controcallsign 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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