Approved by OMB 3060–0678

Date & Time Filed: Aug 23 2005 3:14:34:290PM File Number: SES–MOD–INTR2005–01934

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	I
Enter a description of this application to identify it on the main menu:	
Relocate of Existing State College Site	
1–8. Legal Name of Applicant	

Name:	DynCorp Information Systems LLC	Phone Number:	703-818-4683
DBA Name:		Fax Number:	703-818-4434
Street:	15000 Conference Center Dr.	E-Mail:	greed6@csc.com
City:	Chantilly	State:	VA
Country:	USA	Zipcode:	20151 –
Attention:	Gerald Reed		

Name of Contact	Representative		
Name:	Gerald Reed	Phone Number:	703 818 4683
Company:	DynCorp Information Systems	Fax Number:	703 818 4434
Street:	15000 Conference Center Drive	E–Mail:	greed6@csc.com
City:	Chantilly	State:	VA
Country:	USA	Zipcode:	20151-3808
Attention:	Gerald Reed	Relationship:	Engineer

CLASSIFICATION OF FILING

17. Choose the button next to the	
classification that applies to this filing for	(N/A) b1. Application for License of New Station
both questions a. and b. Choose only one	(N/A) 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
a1. Earth Station	(N/A) b4. Modification of License or Registration
	b5. Assignment of License or Registration
• a2. Space Station	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 (s	ee 47 C.F.R.Section 1.1114).
O Governmental Entity O Noncomme	ercial educational licensee	
• Other(please explain):		
17d.		
Fee Classification CGS – Fixed Satellite S Earth Station	Small Transmit/Receive	
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:
E000122		SESI 102000021000269
		SESLIC2000031000368

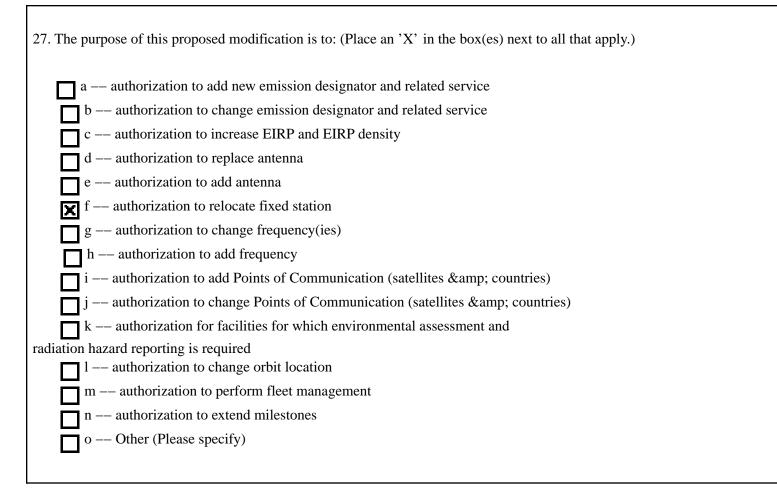
TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provid	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	Using Non–U.S. licensed satellites
23. If applicant is providing INTERNATIONAL COMMON CARRIER a facilities:	service, see instructions regarding Sec. 214 filings. Choose one. Are these
• Connected to a Public Switched Network • Not connected to a	Public Switched Network O 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	anal 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
o c. 12/14 GHz VSAT Network
O 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



ENVIRONMENTAL POLICY

28. Would a Commission grant of any proposal in this application or amendment have a significant environmental	🔿 Yes 🍙 No
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	Radiation Ha
must accompany all applications for new transmitting facilities, major modifications, or major amendments.	Rudiation Ha

Radiation Hazard Rep

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?	0	Yes	۲	No		
30. Is the applicant an alien or the representative of an alien?	0	Yes	۲	No	0	N/A
31. Is the applicant a corporation organized under the laws of any foreign government?	0	Yes	۲	No	0	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	۲	No	0	N/A

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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	le 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.	O 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	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.	• Yes	O 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.)

DynCorp Information Sstems LLC desire to re-locate their existing C-band Transmit/Receive and Receive-only earth station (Call Sign

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.)

Individual

O Unincorporated Association

- Partnership
- Corporation

Governmental Entity

Other (please specify)

	Title of Person Signing cipal Member Technical Staff
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 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

E13. Lat/Lon Coordinates are: E14. Site Elevation (AMSL):		• NAD-27 342.0 meters	NAD-83	O N/A
E12. Longitude:	77 ° 50 ' 49.0 "W			
E11. Latitude:	40 °49 '43.8 "N			
E10. Area of Opera	ation:	ALSAT		
E4. State	PA	E9. Zip Code	16801	
	328 Innovation Blvd.	E8. County:	Centre	
E3. Street:	National Weather Service Forecast Office	E7. City:	State College	
E2: Contact Name	Gerald Reed	E6. Phone Number:	7038184683	
E1: Site Identifier:	State College	E5. Call Sign:	E000122	

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.	O Yes	⊚ ^{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}	● 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 Eshibit No A	• Yes	o No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	• Yes	o 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?Exhibit No D FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION.	O Yes	s 👩 No

Satellite Name: 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	E31. Model	E32. Antenna Size <meters></meters>	E41/42. Antenna Gain Transmint and/or Recieve (dBi at GHz)
State College	1	1	Prodelin Corp	2.4M	2.4	38.0 dBi at 3.950
State College	1	1	Prodelin Corp	2.4M	2.4	42.0 dBi at 6.175
State College	2	1	Comtech	3.8M	3.8	42.2 dBi at 3.950

E28. Antenna Id	E33/34. Diameter Minor/Major (meters)	E35. Above Ground Level (meters)	E36. Above Sea Level(meters)	E37. Building Height Above Ground Level (meters)		E39. Maximum Antenna Height Above Rooftop (meters)	EIRP for al
1	0.0/0.0	14.0	356.0	11.0	1.0	3.0	42.0
2	0.0/0.0	15.5	357.5	11.0	0.0	4.5	0.0
FREQUENCY	•	•					

E28. Antenna Id	E43/44. Frequency Ban (MHz)	E45. ds T/R Mode	E46. Antenna Polarization(H,V, L,R)	E47. Emission Designator	E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)			
1	3700 420	00 R	Horizontal	21K0G7D	0.0	0.0			
E50. Modulation entirety.) Digital Da		If the complete descrip	ption does not appear ir	n this box, please go t	o the end of the form	to view it in its			
1	3700 420	00 R	Vertical	21K0G7D	0.0	0.0			
E50. Modulation entirety.)	and Services (If the complete descrip	ption does not appear ir	n this box, please go t	o the end of the form	to view it in its			
Digital Data									
1	5925 642	25 T	Horizontal	21K0G7D	28.8	21.6			

E50. Modulation entirety.)	and Services	(If th	ne complete descripti	on does not appear in	this box, please go t	o the end of the form	to view it in its			
Digital Da	ta									
1	5925	6425	Т	Vertical	21K0G7D	28.8	21.6			
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 Data									
2	3700	4200	R	Horizontal	21K0G7D	0.0	0.0			
E50. Modulation entirety.)	and Services	(If th	ne complete descripti	on does not appear in	this box, please go t	o the end of the form	to view it in its			
Digital Data										
2	3700	4200	R	Horizontal	33M5G7D	0.0	0.0			

E50. Modulati entirety.)	on and Servic	es (If t	he complete de	scription does not app	bear in this box, please	go to the end of t	the form to view it in its
Digital 1	Data						
2	3700	4200	R	Vertical	21K0G7D	0.0	0.0
E50. Modulati entirety.) Digital 1	Data		-			- 	the form to view it in its
2	3700	4200	R	Vertical	33M5G7D	0.0	0.0
E50. Modulati entirety.)	on and Servic	es (If t	he complete de	scription does not app	bear in this box, please	go to the end of t	the form to view it in its
Digital 1	Data						

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	n	E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)	
1	Geostationary	3700 4200	60.0/143.0	153.8	39.4	253.2	10.0		0.0	
	Geostationary	5925 6425	60.0/143.0	153.8	39.4	253.2	10.0		-12.9	
2	Geostationary	3700 4200	60.0/143.0	153.8	39.4	253.2	10.0		0.0	
REMOTE CO	NTROL POIN	T 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. E66. Phone Number										
E62. Street Address										
E63. City E68. County						E67/68. State/Country /		E64.	Zip Code	

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