Approved by OMB 3060–0678

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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: Iridium Satellite Modification Application for Resubmission (September 2005)

1–8. Legal N	ame of App	plicant		
N	lame:	Iridium Satellite LLC	Phone Number:	301-571-6200
	DBA Name:		Fax Number:	301-571-6250
S	treet:	6701 Democracy Blvd.	E–Mail:	olga.madruga-forti@iridium.com
		Suite 500		
C	City:	Bethesda	State:	MD
C	Country:	USA	Zipcode:	20817 –
А	ttention:	Ms Olga Madruga-Forti		

ne of Contact F	Representative		
Name:	Jennifer D. Hindin	Phone Number:	202-719-7000
Company:	Wiley Rein & Fielding LLP	Fax Number:	202-719-7207
Street:	1776 K Street, NW	E-Mail:	jhindin@wrf.com
City:	Washington	State:	DC
<b>Country:</b>	USA	Zipcode:	20006-
Attention:		<b>Relationship:</b>	Legal Counsel

## 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 (see 47 C.F.R.Section 1.1114).					
<b>  ▼</b>					
• Other(please explain): Application is	s resubmitted pursuant to 47 C.F.R. Section 1.1	1109(d)			
17d.					
Fee Classification CGB – Mobile Satellite	e Earth Stations				
18. If this filing is in reference to an existing station, enter:	19. If this filing is an amendment to a pendin modification please enter only the file numb	ng application enter both fields, if this filing is a er:			
(a) Call sign of station:	(a) Date pending application was filed:	(b) File number:			
E960132		SESLIC1996011601967			

## TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provide 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 service, see instructions regarding Sec. 214 filings. Choose one. Are these facilities:
Connected to a Public Switched Network O Not connected to a Public Switched Network O N/A
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: 1616Frequency Upper: 1626.5(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
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 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.

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

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

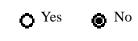
35. Does the Applicant request any waivers or exemptions from any of the Commission's Rules? If Yes, attach as an exhibit, copies of the requests for waivers or exceptions with supporting documents.	Yes	O No
36. Has the applicant or any party to this application or amendment had any FCC station authorization 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 No ■

O Yes O No ⊚ N/A

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	le No
38. Has any court finally adjudged the applicant, or any person directly or indirectly controlling the applicant, guilty of unlawfully monopolizing or attemptiing 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	<b>O</b> Yes Exhibit 5	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 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.	Exhibit 2	

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

Exhibit 1

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?N/A

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.)

See Exhibit 3 - Description of Proposed Modification

Exhibit 3

#### 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

Unincorporated Association

- Partnership
- Corporation

Governmental Entity

Other (please specify)

46. Title of Person Signing Vice President – Regulatory & Legal

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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

Location of Earth S	tation Site			
E1: Site Identifier:	N/A	E5. Call Sign:	E960132	
E2: Contact Name	N/A	E6. Phone Number:	N/A	
E3. Street:	N/A	E7. City:	N/A	
		E8. County:	N/A	
E4. State		E9. Zip Code	N/A	
E10. Area of Opera	ation:	United States		
E11. Latitude:	0 °0 '0.0 "			
E12. Longitude:	0 °0 '0.0 "			
E13. Lat/Lon Coord	dinates are:	ONAD-27	O NAD−83	● N/A
E14. Site Elevation	(AMSL):	0.0 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.	O Yes	O <sup>No</sup>	● <sup>N/A</sup>
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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 <sup>Yes</sup>	O <sup>No</sup>	● <sup>N/A</sup>
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	0	Yes	۲	No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	0	Yes	۲	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.	0	Yes	۲	No

Satellite Name: OTHER   OTHER   If you selected OTHER, please en	ter the following:
E21. Common Name: Iridium	E22. ITU Name: HIBLEO–2
E23. Orbit Location: Nongeostat	E24. Country: USA
POINTS OF COMMUNICATION (Destination Points)	
E25. Site Identifier: N/A	

E26. Common Name: Iridium	E27. Country: USA

## 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)
N/A	EXT_TX	50000	Eagle Broadband, Inc.	L10-787	0.0889	6.0 dBi at 1.621
N/A	INT_RX	50000	Eagle Broadband, Inc.	L10-787	0.0889	6.0 dBi at 1.621
N/A	EXT_RX	50000	Eagle Broadband, Inc.	L10-787	0.0889	6.0 dBi at 1.621
N/A	INT_TX	50000	Eagle Broadband, Inc.	L10-787	0.0889	6.0 dBi at 1.621

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)	E38. Total Input Power at antenna flange (Watts)	E39. Maximum Antenna Height Above Rooftop (meters)	
EXT_TX	0.0889/0.0889	0.0	0.0	0.0	16.0	6.1	18.04
INT_RX	0.0889/0.0889	0.0	0.0	0.0	0.0	0.0	0.0
EXT_RX	0.0889/0.0889	0.0	0.0	0.0	0.0	6.1	0.0
INT_TX	0.0889/0.0889	0.0	0.0	0.0	0.0	0.0	-74.0
FREQUENCY	1			1		1	

E28. Antenna Id	E43/44. Frequency Bands (MHz)	E45. 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)
EXT_TX	1616 1626.5	Т	Right Hand Circular	41K7Q7W	18.04	10.08
E50. Modulation entirety.) QPSK/Voice		ne complete descripti	on does not appear in	this box, please go t	o the end of the form	to view it in its
INT_RX	1616 1626.5	R	Right Hand Circular	41K7Q7W	0.0	0.0
E50. Modulation entirety.) QPSK/Voice	×	ne complete descripti	on does not appear in	this box, please go t	o the end of the form	to view it in its
EXT_RX	1616 1626.5	R	Right Hand Circular	41K7Q7W	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/Voice	& Data					
NT_TX	1616 1626.5	Т	Right Hand Circular	41K7Q7W	-74.0	-81.96
E50. Modulation entirety.) QPSK/Voice	· · · ·	e complete descriptio	on does not appear in	n this box, please go t	o the end of the form	to view it in its

## FREQUENCY COORDINATION

E28. Antenna Id		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	E59. Antenna Elevation Angle Western Limit	E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
EXT_TX	Non– Geostationary	1616 MHz 1626.5 MHz	0.0/0.0	0.0	0.0	0.0	0.0	10.08

INT_RX	Non– Geostationary	1616 MHz 1626.5 MHz	0.0/0.0	0.0	0.0	0.0	0.0	0.0
EXT_RX	Non– Geostationary	1616 MHz 1626.5 MHz	0.0/0.0	0.0	0.0	0.0	0.0	0.0
INT_TX	Non– Geostationary	1616 MHz 1626.5 MHz	0.0/0.0	0.0	0.0	0.0	0.0	-81.96
REMOTE C	ONTROL POIN	T LOCATION	1		I		I	I
	Sign ease enter the calls hich this applicati	•	÷	ot the	E66. Phone	Number		

E62. Street Address

E63. City	E68. County	E67/68. State/Country /	E64. Zip Code

#### FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

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