37. Has the applicant, or any party to this application or amendment, or any party directly or indirectly con ○ Yes ○ No
the applicant ever been convicted of a felony by any state or federal court? If Yes, attach as an exhibit, an
explination of circumstances.

38. Has any court finally adjudged the applicant, or any person directly or indirectly controlling the applica ○ Yes ○ No
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
means or unfair methods of competition?If Yes, attach as an exhibit, an explanation of circumstances

39. Is the applicant, or any person directly or indirectly controlling the applicant, currently a party in any pe ○ Yes ○ No
matter referred to in the preceding two items? If yes, attach as an exhinit, an explanation of the circumsta

40. If the applicant is a corporation and is applying for a space station license, attach as an exhibit the na
address, and citizenship of those stockholders owning a record and/or voting 10 percent or more of the Fi
voting stock and the percentages so held. In the case of fiduciary control, indicate the beneficiary(ies) or
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 subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Dru 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substa 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes. Yes No

42a. Does the applicant intend to use a non-U.S. licensed satellite to provide service in the United States 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 No

42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued, what administr 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 t box, please go to the end of the form to view it in its entirety.)

Outdated designators and in accurate coordinates

43a. Geographic Service Rule Certification By selecting A, the undersigned certifies that the applicant is not subject to the geographic service or geo coverage requirements specified in 47 C.F.R. Part 25.
By selecting B, the undersigned certifies that the applicant is subject to the geographic service or geograp coverage requirements specified in 47 C.F.R. Part 25 and will comply with such requirements.
By selecting C, the undersigned certifies that the applicant is subject to the geographic service or geograp coverage requirements specified in 47 C.F.R. Part 25 and will not comply with such requirements becaus feasible as a technical matter to do so, or that, while technically feasible, such services would require so r compromises in satellite design and operation as to make it economically unreasonable. A narrative desc and technical analysis demonstrating this claim are attached.

◉ A

○ B

○ C

CERTIFICATION

The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory p
United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordanc
application. The applicant certifies that grant of this application would not cause the applicant to be in violation of the spectrum aggre
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 ap
The undersigned, individually and for the applicant, hereby certifies that all statements made in this application and in all attached ex
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)

45. Name of Person Signing	46. Title of Person Signing
Michele Tully	VP Administration

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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 Station Site

E1: Site Identifier:	WITN E6878	E5. Call Sign:	E6878
E2: Contact Name	Michele Tully	E6. Phone Number:	321-723-5395
E3. Street:	275 E. Arlington	E7. City:	Greenville
		E8. County:	Pitt
E4. State	NC	E9. Zip Code	27858
E10. Area of Operation:		CONUS	
E11. Latitude:	35 ° 35 ' 19.32" N		
E12. Longitude:	77 ° 22 ' 23.09" W		
E13. Lat/Lon Coordinates are:		◉ NAD-27	○ 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, proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a) and (b) as dem by the manufacturer's qualification measurement? If NO, provide as a technical analysis showing compliar two-degree spacing policy. ◉ Yes ○ No ○ N/A

E16. If the proposed antenna(s) do not operate in the Fixed Satellite Service (FSS), or if they operate in t Satellite Service (FSS) with non-geostationary satellites, do(es) the proposed antenna(s) comply with the gain patterns specified in Section 25.209(a2) and (b) as demonstrated by the manufacturer's certification measurements?

○ Yes ○ No ◉ N/A

E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the c point.

◉ Yes ○ No

E18. Is frequency coordination required? If YES, attach a frequency coordination report as

○ Yes ◉ No

E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as

○ Yes ◉ No

E20. FAA Notification - (See 47 CFR Part 17 and 47 CFR part 25.113(c)) Where FAA notification is req have you attached a copy of a completed FCC Form 854 and/or the FAA's study regarding the potential ha the structure to aviation?

○ Yes ◉ No

FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION.

POINTS OF COMMUNICATION

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>	E41/42. Antenna Gain Transmint and/or Recieve (____dBi at _____GHz)	
WITN E6878	1	1	ASC Signal	ES56-1	5.6	0.0 dBi at	

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)	E40. Total EIRP for al carriers(dBW)
1	0.0/0.0	8.0	0.0	0.0	0.0	0.0	0.0

FREQUENCY

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)
1	11700 12200	R	Horizontal	36M0G7W	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 entirety.)

NULL

1	14000 14500	T	Vertical	36M0G7W	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 entirety.)

NULL

FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	E54/55. Range of Satellite Arc Eastern/Western 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)
			/					

REMOTE CONTROL POINT LOCATION

E61. Call Sign
E6156

NOTE: Please enter the callsign of the controlling station, not tl callsign for which this application is being filed.

E66. Phone Number
212-664-6175

E62. Street Address
30 Rockefeller Plaza

E63. City
NY

E68. County
Manhattan

E67/68. State/Country
NY/ USA

E64. Zip Code
10112

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 2 hours per response, including the time for reviewing in
searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of informat
have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write
Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0678), Washington, DC 20554. We will also
your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov.
DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the governmer
conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice.
collection has been assigned an OMB control number of 3060-0678.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.