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Callsign/Satellite ID:

APPLICATION FOR EARTH STATION AUTHORIZATIONS FCC 312 MAIN FORM FOR OFFICIAL USE ONLY FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:

Receive-only Earth Station Registration EMMAUS

1–8. Legal Name of Applicant

Name: Service Electric Cable TV, Inc. **Phone Number:** 610–841–8350

DBA Fax Number: 610–865–5031

Name:

Street: 2200 Avenue A E-Mail: Kellyj@sectv.com

City: Bethlehem State: PA

Country: USA Zipcode: 18017 -

Attention: Mr Jeff Kelly

9–16. Name of Contact Representative

Name: Service Electric Cable TV, Inc. **Phone Number:** 610–841–8350

Company: Fax Number: 610–865–5031

Street: 2200 Avenue A E–Mail:

City: Bethlehem State: PA

Country: USA Zipcode: 18017–

Attention: Jeff Kelly **Relationship:**

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	 b. b1. Application for License of New Station b2. Application for Registration of New Domestic Receive—Only Station 		
for 17a and only one for 17b. a. a. 1. Earth Station (N/A) a2. Space Station	(N/A) b3. Amendment to a Pending Application (N/A) b4. Modification of License or Registration (N/A) b5. Assignment of License or Registration (N/A) 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 b10. Other (Please specify)		
	b11. Application for Earth Station to Access a Non–U.S.satellite Not Currently Authorized to		
	Provide the Proposed Service in the Proposed Frequencies in the United States. b12. Application for Database Entry		
	(N/A) b13. Amendment to a Pending Database Entry Application (N/A) b14. Modification of Database Entry		
17c. Is a fee submitted with this application	ion?		
1	159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).		
O Governmental Entity O Noncomme	ercial educational licensee		
Other(please explain):			
17d.			
Fee Classification CMO – Receive Only E	arth Station		
l .			

18. If this filing is in reference to an	19. If this filing is an amer	idment to a pending	application enter:	
existing station, enter:	(a) Date pending application was filed:		(b) File number of pending application:	
(a) Call sign of station: Not Applicable	Not Applicable		Not Applicable	
ΓΥΡΕ OF SERVICE				
20. NATURE OF SERVICE: This filing is	for an authorization to provid	le or use the followi	ng type(s) of service(s): Select all that a	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 thonly one. Common Carrier Non–Common	••	Using U.S. lic	applicant, check all that apply. ensed satellites S. licensed satellites	
23. If applicant is providing INTERNATIC facilities: Connected to a Public Switched				one. Are these

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: Frequency Upper:
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
(N/A) e. Geostationary Space Station
(N/A) f. Non-Geostationary Space Station
og. Other (please specify)
26. TYPE OF EARTH STATION FACILITY: Choose only one.
Transmit/Receive Transmit-Only Receive-Only 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.)
Not Applicable
1

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.	٥	Yes	No No	
ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aerona aeronautical fixed radio station services are not required to respond to Items 30–34.	nutical er	route	or	
29. Is the applicant a foreign government or the representative of any foreign government?	O Yes	● N	o	
30. Is the applicant an alien or the representative of an alien?	• Yes	O N	o 🌘 N/A	`
31. Is the applicant a corporation organized under the laws of any foreign government?	O Yes	O N	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?	O Yes	O N	o 💿 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	O Yes O No	
BASIC QUALIFICATIONS 35. Does the Applicant request any waivers or exemptions from any of the Commission's Rules?	• Vac	• No
If Yes, attach as an exhibit, copies of the requests for waivers or exceptions with supporting documents.	⊚ Yes	O 140
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.	• Yes	No

	een convicted of a felony by a		any party directly or indirectly rt? If Yes, attach as an exhibit.		
		O Yes ⊗ No			
38. Has any court finally adjudged guilty of unlawfully monopolizing indirectly, through control of manumeans or unfair methods of compe	or attemptiing unlawfully to facture or sale of radio appar	monopolize radio com ratus, exclusive traffic a	munication, directly or arrangement or any other	O Yes	No
39. Is the applicant, or any person matter referred to in the preceding				O Yes	No
40. If the applicant is a corporation address, and citizenship of those st voting stock and the percentages so beneficiaries. Also list the names a	ockholders owning a record as held. In the case of fiducian	and/or voting 10 percer ry control, indicate the	nt or more of the Filer's beneficiary(ies) or class of		

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.	• Yes	O No
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued, v coordinated or is in the process of coordinating the space station? Premitted List	vhat administi	ration has

43. Description. (Summarize the nature of the application and the services to be provided). not appear in this box, please go to the end of the form to view it in its entirety.)

(If the complete description does

Registration for C Band receive only earth station to communicate with Satellites on the Permitted Space Station List. No coordination report is provided pursuant to the wavier granted in Public Notice DA 18-398. The coordinated provide in E 11 and E12 are in WGS84 format,

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

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.

O Individual				
 Unincorporated Association 				
Partnership				
Corporation				
Governmental Entity				
Other (please specify)				
45. Name of Person Signing Jeffery J Kelly		46. Title of Person Signing Director of Engineering		
47. Please supply any need attachi	ments.			
Attachment 1:	Attachment 2:	Atta	achment 3:	
	Attachment 2:	Atta	achment 3:	

SATELLITE EARTH STATION AUTHORIZATIONS FCC Form 312 – Schedule B:(Technical and Operational Description) FOR OFFICIAL USE ONLY

Location of Ear	th Station Site					
E1: S	ite Identifier:	EMMAUS	E5. Call Sign:			
E2: C	Contact Name	Engineer in Charge	E6. Phone Number:	6107912024		
E3. S	treet:	2594 Columbus Drive	E7. City:	Emmaus		
			E8. County:	Lehigh		
E4. S	tate	PA	E9. Zip Code	18049		
E10.	Area of Operat	ion:	Emmaus PA.			
E11.	Latitude:	40 °31 '30.7 "N				
E12.	Longitude:	75 °28 '44.7 "W				
E13.	Lat/Lon Coord	linates are:	○ NAD-27	NAD-83	O N/A	
E14.	Site Elevation	(AMSL):	268.8 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 No	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	•	No
E18. Is frequency coordination required? If YES, attach a frequency coordination report as	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	O Yes	•	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.	O Yes	•	No
POINTS OF COMMUNICATION	•		
Satellite Name:PERMITTED LIST If you selected OTHER, please enter the following:			_

E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:

Satellite Name:PERMITTED LIST	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		Size <meters></meters>	E41/42. Antenna GainTransmint and/or Recieve (dBi atGHz)
EMMAUS	Emmaus SS	1	ATCi	Simulsat 5	5.0	44.5 dBi at 3.95

Id	Diameter		(meters)	Height Above Ground	Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers (dBW)
Emmaus SS	5.2/9.6	10.0	278.8	0.0	0.0	0.0	0.0

FREQUENCY

	E43/44. Frequency Bands (MHz)	E45. T/R Mode			E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
Emmaus SS	3700 4200	R	Linear and Circular	n/a	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.)

FM 3	36MOG7W
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FREQUENCY COORDINATION

	E51. Satellite Orbit Type	Frequency Limits(MHz)	Range of Satellite Arc E/W Limit	E56. Earth Station Azimuth Angle Eastern Limit	Antenna Elevation Angle	Station Azimuth Angle	Angle Western	E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
Emmaus SS	Geostationary	3700 4200	60.0/ 143.0	154.0	41.6	254.4	9.9	0.0

REMOTE CONTROL POINT LOCATION

E61. Call Sign	E65. 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	E67. County	E64/68. State/Country	E66. Zip Code

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