

SyTech

SYSTEMS ENGINEERING TECHNOLOGIES CORPORATION

6121 LINCOLNIA ROAD, SUITE 200, ALEXANDRIA, VA 22312 • (703) 941-7887 • FAX (703) 941-7997

JAN 28 2002

January 09, 2002

Satellite and
Radiocommunications Division
International Bureau

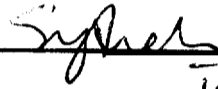
Ms. Magalie Roman Salas
Secretary
Federal Communications Commission
International Bureau-Earth Stations
The Portals
445 Twelfth Street, SW
Washington, DC 20554

SES-STA-2002011-1-00076
Systems Engineering Technologies Corporation

Date: 1/22/02 to 7/20/02

Authorized by:

Signature



1/30/02


Re: SyTech Corporation
Request for Temporary
Authority for Fixed Ku-Band
Earth Station

Dear Sirs:

SyTech request a Temporary Authority for a Fixed Ku-Band Earth Station to support the National Security Missions of El Paso Intelligence Center (EPIC) of the Drug Enforcement Administration (DEA). This Earth Station has to come on-line by February 01, 2002 or the mission will be seriously jeopardized. For your convenience we are attaching a letter from The DEA.

The antennas will be located on the roof of a four-story building with secure access to the roof. If you have any questions please call the undersigned at 703-(941-7887)

Sincerely,


SyTech Corporation

Enclosure

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING		FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE		Approved by OMB 3060-0589 Page No <u>1</u> of <u> </u>	
(1) LOCKBOX # 358160		FCC/MELLON JAN 1 1 2002		SPECIAL USE	
				FCC USE ONLY	
SECTION A - PAYER INFORMATION					
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Svtech Corporation				(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$145.00	
(4) STREET ADDRESS LINE NO. 1 6121 Lincolnia Rd. , Suite 200					
(5) STREET ADDRESS LINE NO. 2					
(6) CITY Alexandria				(7) STATE Va.	(8) ZIP CODE 22312
(9) DAYTIME TELEPHONE NUMBER (include area code) 703 941-7887			(10) COUNTRY CODE (if not in U.S.A.)		
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED					
(11) PAYER (FRN) 0005-8137-61			(12) PAYER (TIN)		
IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)					
(13) APPLICANT NAME					
(14) STREET ADDRESS LINE NO. 1					
(15) STREET ADDRESS LINE NO. 2					
(16) CITY				(17) STATE	(18) ZIP CODE
				Satellite and	
(19) DAYTIME TELEPHONE NUMBER (include area code)			(20) COUNTRY CODE (if not in U.S.A.)		
			Radiocommunications Division International Bureau		
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED					
(21) APPLICANT (FRN)			(22) APPLICANT (TIN)		
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET					
(23A) CALL SIGN/OTHER ID		(24A) PAYMENT TYPE CODE		(25A) QUANTITY	
		CGX		1	
(26A) FEE DUE FOR (PTC)		(27A) TOTAL FEE		FCC USE ONLY	
		\$145.00 145.00			
(28A) FCC CODE 1			(29A) FCC CODE 2		
(23B) CALL SIGN/OTHER ID		(24B) PAYMENT TYPE CODE		(25B) QUANTITY	
		CGX		1	
(26B) FEE DUE FOR (PTC)		(27B) TOTAL FEE		FCC USE ONLY	
		\$145.00 145.00			
(28B) FCC CODE 1			(29B) FCC CODE 2		
SECTION D - CERTIFICATION					
(30) CERTIFICATION STATEMENT					
I, _____ certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATURE _____ DATE _____					
SECTION E - CREDIT CARD PAYMENT INFORMATION					
(31)		MASTERCARD/VISA ACCOUNT NUMBER:		EXPIRATION DATE:	
<input type="checkbox"/> MASTERCARD					
<input type="checkbox"/> VISA		I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.			
		SIGNATURE _____		DATE _____	

SPECIAL USE
FCC USE ONLY

USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT			
SECTION BB - ADDITIONAL APPLICANT INFORMATION			
(13) APPLICANT NAME			
(14) STREET ADDRESS LINE NO. 1			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY			(17) STATE
(18) ZIP CODE			
(19) DAYTIME TELEPHONE NUMBER (include area code)		(20) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED			
(21) APPLICANT (FRN)		(22) APPLICANT (TIN)	
IF MORE BOXES ARE NEEDED, USE ADDITIONAL FCC 159-C CONTINUATION SHEETS TO LIST EACH SERVICE			
SECTION CC - PAYMENT INFORMATION			
(23A) CALL SIGN/OTHER ID		(24A) PAYMENT TYPE CODE	(25A) QUANTITY
(26A) FEE DUE FOR (PTC)	(27A) TOTAL FEE	FCC USE ONLY	
(28A) FCC CODE 1	(29A) FCC CODE 2		
(23B) CALL SIGN/OTHER ID		(24B) PAYMENT TYPE CODE	(25B) QUANTITY
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1	(29B) FCC CODE 2		
(23C) CALL SIGN/OTHER ID		(24C) PAYMENT TYPE CODE	(25C) QUANTITY
(26C) FEE DUE FOR (PTC)	(27C) TOTAL FEE	FCC USE ONLY	
(28C) FCC CODE 1	(29C) FCC CODE 2		
(23D) CALL SIGN/OTHER ID		(24D) PAYMENT TYPE CODE	(25D) QUANTITY
(26D) FEE DUE FOR (PTC)	(27D) TOTAL FEE	FCC USE ONLY	
(28D) FCC CODE 1	(29D) FCC CODE 2		
(23E) CALL SIGN/OTHER ID		(24E) PAYMENT TYPE CODE	(25E) QUANTITY
(26E) FEE DUE FOR (PTC)	(27E) TOTAL FEE	FCC USE ONLY	
(28E) FCC CODE 1	(29E) FCC CODE 2		
(23F) CALL SIGN/OTHER ID		(24F) PAYMENT TYPE CODE	(25F) QUANTITY
(26F) FEE DUE FOR (PTC)	(27F) TOTAL FEE	FCC USE ONLY	
(28F) FCC CODE 1	(29F) FCC CODE 2		



U.S. Department of Justice
Drug Enforcement Administration

El Paso Intelligence Center
11339 SSG Sims Street
El Paso, Texas 79908-8098

December 18, 2001

JAN 28 2002

**Satellite and
Radiocommunications Division**
International Bureau

Ms. Sylvia Lam
Federal Communications Commission
445 12th Street, S.W.
Washington, D.C. 20554

Re: SYTECH Ku Band Satellite Frequency Request

Dear Ms. Lam:

The El Paso Intelligence Center (EPIC) of the Drug Enforcement Administration will be using the Ku frequencies requested by the SYTECH Corporation. These frequencies will be used by the EPIC to address the transfer of national security communications from international locations.

We would greatly appreciate any service that you can provide to expedite the approval of this request. Should you have any questions or if we can be of any service, please feel free to call Special Agent Mike Bogdan at 915-760-2270.

Sincerely,

A handwritten signature in black ink, appearing to read "John David Stenhouse".

John David Stenhouse
Acting Director

FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS

Approved by: 3060678
F-1 Fee Under \$100
Per Report 4 110

FCC Use Only	File Number:
Call Sign:	Fee Number:

APPLICANT INFORMATION

1 Legal Name or Applicant SyTech Corporation		2 Voice Telephone Number (703) 941-7887	
3 Other Name Used for Doing Business (if any)		4 Fax Telephone Number (703) 941-7997	
5 Mailing Street Address or P.O. Box 6121 Lincoln Rd, Suite 200		6 City Alexandria	
ATTENTION: JOSE A. DIAZ		7 State/Country (if not U.S.A.) VA	
9 Name of Contact Representative (if other than applicant) Satellite and Radiocommunications Division		10 Voice Telephone Number	
11 Firm or Company Name International Bureau		12 Fax Telephone Number	
13 Mailing Street Address or P.O. Box		14 City	
ATTENTION:		15 State/Country (if not U.S.A.)	
		16 Zip Code	

CLASSIFICATION OF FILING

17 Place an "X" in the box next to the classification that applied to this filing for both questions a. and b. Mark only one box for 17a. and only one box for 17b.		18 If this filing is in reference to an existing station, enter: Call sign of station:	
<input checked="" type="checkbox"/> a1 Earth Station	<input checked="" type="checkbox"/> b1 Application for License of New Station	<input type="checkbox"/> b2 Application for Registration of New Domestic Receive-Only Station	Specify:
<input type="checkbox"/> a2 Space Station	<input type="checkbox"/> b3 Amendment to a Pending Application	<input type="checkbox"/> b4 Modification of License or Registration	
<input type="checkbox"/> b5 Assignment of License or Registration	<input type="checkbox"/> b7 Notification or Minor Modification	<input type="checkbox"/> b8 Application for License of New Receive-Only Station Using Non-U.S. Licensed Satellite	
<input type="checkbox"/> b6 Transfer of Control License or Registration	<input type="checkbox"/> b9 Letter of Intent to Use Non-U.S. Licensed Satellite to provide Service in the United States	<input type="checkbox"/> b10 Other	
19. If this filing is an amendment to a pending application enter: (a) Date pending application was filed: (b) File number of pending application:			

TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provide or use the following type(s) of service(s): Place an "X" in the box(es) next to all that apply

a. Fixed Satellite c. Radiodetermination Satellite

b. Mobile Satellite d. Earth Exploration Satellite

a. Fixed Satellite e. Direct to Home Fixed Satellite

b. Mobile Satellite f. Digital Audio Radio Service

g. Other (Please Specify) _____

21. STATUS:

a. Common Carrier b. Non-Common Carrier

22. If earth station applicant, place an "X" in the box(es) next to all that apply

a. Using U.S. licensed satellites b. Using Non-U.S. licensed satellites

23. If applicant is providing INTERNATIONAL COMMON CARRIER service, see instructions regarding Sec 214 filings. Mark only one box. Are these facilities:

a. Connected to the Public Switched Network b. Not connected to the Public Switched Network

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) _____

TYPE OF STATION

25. CLASS OF STATION: Place an "X" in the box next to the class of station that applies. Mark only one box.

a. Fixed Earth Station b. Temporary-Fixed Earth Station c. 12/14 GHz VSAT Network d. Mobile Earth Station e. Space Station f. Other (Specify)

26. TYPE OF EARTH STATION FACILITY: Mark only one box

a. Transmit/Receive b. Transmit-Only c. Receive-Only

PURPOSE OF MODIFICATION OR AMENDMENT

27. The purpose of this proposed modification or amendments 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

5. authorization to add antenna

f. authorization to relocate fixed station

g. authorization to change assigned frequency(ies)

h. authorization to add Points of Communication (satellites & countries)

i. authorization to change Points of Communication (satellites & countries)

j. authorization for facilities for which environmental assessment and radiation hazard reporting is required

k. 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 11307? IF YES, submit the statement as required by Sections 11308 and 11311 of the Commission's rules. 47 C.F.R. §§ 11308 and 11311, as an exhibit to this application

YES NO

A Radiation Hazard Study must accompany all applications as an exhibit for new transmitting facilities, major modifications, or amendments. Refer to OET Bulletin 65.

ALIEN OWNERSHIP

29. Is the applicant a foreign government or the representative of any foreign government?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
30. Is the applicant an alien or the representative of an alien?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
31. Is the applicant a corporation organized under the laws of any foreign government?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
32. Is the applicant a corporation of which more than one-fifth of the capital stock is owned or 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?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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 or 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?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
34. If any answer to questions 29, 30, 31, 32 and/or 33 is Yes, attach as an exhibit, the 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 <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
36. Has the applicant or any party to this application 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 explanation of the circumstances.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
37. Has the applicant, or any party to this application, 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 explanation of the circumstances.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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 radios apparatus, exclusively a traffic arrangement or any other mean or unfair method of competition? If Yes, attach as an exhibit, an explanation of the circumstances.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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 exhibit, an explanation of the circumstances.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
40. If the applicant is a corporation and is applying for a space station license, attach as an exhibit the names, addresses, and citizenship or those stockholders owning 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 the applicant nor any other party to the application is subject to a denial or Federal benefits that includes FCC benefits pursuant to Section 3301 of the Anti-Drug Act or 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 C.F.R. 1.2002(b) for the meaning of "party to the application" for these purposes.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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 <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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? Mexico		

43. Description. (Summarize the nature of the application and the services to be provided)

This application is for one 2.4 meter and one 1.2 meter, Ku-band transmit/receive earth stations. These antennas will operate with the U.S. licensed satellites (ALSAT) and non-U.S. licensed satellites.

Exhibit No.	Identify all exhibits that are attached to this application.
A	Radiation Hazard Report - 2.4 meter
8	Radiation Hazard Report - 1.2 meter
3	FAA Notification Exemption

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): (Place an "X" in the box next to applicable response.)
 a. Individual
 b. Unincorporated Association
 c. Partnership
 d. Corporation
 e. Governmental Entity
 e. Other
 (Please specify) _____

45. Typed Name of Person Signing _____
 46. Title of Person Signing _____

47. Signature _____
 48. Date _____

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).

FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS

Technical and Operational Description

(Place an "X" in one of the blocks below)

- License of New Station
- Registration of new Domestic
- Amendment (a Pending Application
- Modification
- License/Registration
- Notification of Minor Modification
- Receiver-Only Station

B1. Location of Earth Station Site. If temporary-fixed, mobile, or VSAT remote facility; specify area of operation and point of contact. If VSAT sub station, give its location. For VSAT networks attach individual Schedule B, Page 1 sheets for each sub station and each remote station. Individually provide the Location, Points of Communications, and Destination Points for each sub and remote station.

B1a. Station Call Sign	B1b. Site Identifier (HUB, REMO etc.)	B1c. Telephone Number	B1d. Mailing Street Address of Station or Area of Operation	B1e. Name of Contact Person	B1f. City	B1g. County	B1h. State	B1i. Zip Code	B1j. Site Elevation (AMSL)
		703-941-7887	6121 Lincolnia Rd., Suite 200	Jose A Diaz	Alexandria	Fairfax	VA	22312	76 meters
B1k. Lat/Long Coordinates are:	B1j. Geographic Coordinates N/S, Deg. - Min. - Sec. - E/W	Lat. 38° 49' 3.2" N Lon. 77° 8' 14.7" W		B1k. Lat/Long Coordinates are: <input type="checkbox"/> NAD-27 <input checked="" type="checkbox"/> NAD-83					

B2. Points of Communications: List the names and orbit locations of all satellites with which this earth station will communicate. The entry "ALSAT" is sufficient to identify the names and locations of all satellite facilities licensed by the U.S. All non-U.S. licensed satellites must be listed individually.

Satellite Name and Orbit Location	Satellite Name and Orbit Location	Satellite Name and Orbit Location
ALSAT		
Satmex 5		

B3. Destination points for communications using non-U.S. licensed satellites. For each non-U.S. licensed satellite facility identified in section B2 above, specify the destination point(s) (countries) where the services will be provided by this earth station via each non-U.S. licensed satellite system. Use additional sheets as needed.

Satellite Name	List of Destination Points
SATMAX 5	Costa Rica, Mexico, Ecuador, and Alexandria, VA - US

FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
FCC Form 312-Schedule B: (Technical and Operational Description)

B4. Earth Station Antenna Facilities: Use additional pages as needed.

(a) Site ID*	(b) Antenna ID**	(c) Quantity	(d) Manufacturer	(e) Model	(f) Antenna Size (meters)	(g) Antenna Gain (____ dBt at _____ GHz) Transmit and/or Receive
	2.4 M	1	Prodelin	2.4 meter 1251-500	2.4	47.6 dBt at 11 GHz 49.2 dBt at 14 GHz
	1.2 M	1	Prodelin	1.2 meter 1123-500	1.2	41.7 dBt at 11 GHz 43.2 dBt at 14 GHz

B5. Antenna Heights and Maximum Power Limits: (The corresponding Antenna ID in tables B4 and B5 applies to the same antenna)

(a) Antenna ID**	(b) Antenna Structure Registration No.	(c) Above Ground Level (meters)		(d) Above Mean Sea Level (meters)	(e) Building Height Above Ground Level (meters)***	(f) Maximum Antenna Height Above Rooftop (meters)***	(g) Total Input Power at antenna flange (Watts)	(h) Total EIRP for all carriers (dBW)
		Maximum Antenna Height	Ground Level					
2.4 M		14.79	12.19	90.79	12.19	2.6	8	58.23
1.2 M		13.69	12.19	89.69	12.19	1.5	4	49.22

Notes: * If this is an application for a VSAT network, identify the site (Item B1b, Schedule B, Page 1) where each antenna is located. Also include this Site-ID on Schedule B, Page 5. ** Identify each antenna in VSAT network or multi-antenna station with a unique identifier, such as HU/B, REMOTE1, A1, A2, 10M, 12M, 7M, etc. Use this same antenna ID throughout tables B4, B5, B6, and B7 when referring to the same antenna. *** Attach sketch of site or exemption, See 47 CFR Part 17.

FEDERAL COMMUNICATIONS COMMISSION
 APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
 FCC Form 312 - Schedule B: (Technical and Operational Description)

B6. Frequency Coordination Limits: Use additional pages as needed.

Antenna ID* (a)	Frequency Limits (MHz) (b)	Range or Satellite Arc Eastern Limit** (c)	Range or Satellite Arc Western Limit** (d)	Antenna Elevation Angle Eastern Limit (e)	Antenna Elevation Angle Western Limit (f)	Earth Station Azimuth Angle Eastern Limit (g)	Earth Station Azimuth Angle Western Limit (h)	Maximum EIRP Density toward the Horizon (dBW/4kHz) (i)
2.4 M	11700,000 – 11200,000	60.0 W/L.	143.0 W/L.	41.6°	10.0°	153.8°	254.3°	
2.4 M	14000,000 – 14500,000	60.0 W/L.	143.0 W/L.	41.6°	10.0°	153.8°	254.3°	-7.04
1.2 M	11700,000 – 12200,000	60.0 W/L.	143.0 W/L.	41.6°	10.0°	153.8°	254.3°	
1.2 M	14000,000 – 14500,000	60.0 W/L.	143.0 W/L.	41.6°	10.0°	153.8°	254.3°	-7.04

Notes:
 * Provide the ANTENNA-ID from table B4 to identify the antenna to which each frequency band and orbital arc range is associated.
 ** If operating with geostationary satellites, give the orbital arc limits and the associated elevation and azimuth angles. If operating with non-geostationary satellites, give the notation "NON- GEO" for the satellite arc and give the minimum operational elevation angle and the maximum azimuth angle range.

FEDERAL COMMUNICATIONS COMMISSION
 APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS
 FCC Form 312 - Schedule B: (Technical and Operational Description)

If VSAT Network, provide the SITE-ID (Item B1b) of the station that B8-B13 are in response to (HUB, REMOTE1, etc.): _____

B8. 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 measurements? If NO, provide as an exhibit, a technical analysis showing compliance with two-degree spacing policy.	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
B9. 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?	YES <input type="checkbox"/> NO <input type="checkbox"/>		
B10. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	YES <input type="checkbox"/> NO <input type="checkbox"/>		
Remote Control Point Location:			
B10a Street Address			
B10b City	B10c County	B10d State/Country	B10e Zip Code
B10f Telephone Number	B10g Call Sign of Control Station (if appropriate)		
B11. Is frequency coordination required? If YES, attach a frequency coordination report as an exhibit.			
B12. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as an exhibit.			
B13. 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 or the structure to aviation? FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION			