

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

S T A – NYPD Satcom – App Filed

**1. Applicant**

<b>Name:</b>	New York, City of (Police Department)	<b>Phone Number:</b>	718-476-7554
<b>DBA Name:</b>		<b>Fax Number:</b>	718-476-0205
<b>Street:</b>	50-16 59th Place	<b>E-Mail:</b>	jhorst@nypd.org
<b>City:</b>	Woodside	<b>State:</b>	NY
<b>Country:</b>	USA	<b>Zipcode:</b>	11377 -7407
<b>Attention:</b>	John A Horst		

**2. Contact**

<b>Name:</b>	JOHN A. HORST	<b>Phone Number:</b>	718-476-7554
<b>Company:</b>	NEW YORK CITY POLICE DEPARTMENT	<b>Fax Number:</b>	718-476-0205
<b>Street:</b>	50-16 59th PLACE	<b>E-Mail:</b>	jhorst@nypd.org
<b>City:</b>	WOODSIDE	<b>State:</b>	NY
<b>Country:</b>	USA	<b>Zipcode:</b>	11377 -7407
<b>Contact Title:</b>	FCC LICENSE COORD	<b>Relationship:</b>	Other

3. Reference File Number SESLIC2004092401460

4a. 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).
- Governmental Entity     Noncommercial educational licensee
- Other(please explain):

4b. Fee Classification    CGV – Fixed Satellite VSAT System

5. Type Request

- Use Prior to Grant                       Change Station Location                       Other

6. Requested Use Prior Date  
10/20/2004

7. City NEW YORK CITY

8. Latitude  
(dd mm ss.s h) 0 0 0.0

9. State NY

10. Longitude  
(dd mm ss.s h) 0 0 0.0

11. Please supply any need attachments.

Attachment 1: Technical Details

Attachment 2: Radiation Hazard

Attachment 3:

12. Description. (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

NYCPD is requesting to operate a 4 Site Network operating in the Ku Band, consisting of TWO (2) FIXED - 2.4 meter antennas, ONE (1) TEMPORARY FIXED - 1.2 meter antenna, ONE (1) TEMPORARY FIXED - 0.96 meter antenna. All systems contain D.A.M.A. Modems operating on the MIDAS Network utilizing satellite AMC-03, in Geostationary orbit located at 87 degrees

13. 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

No

14. Name of Person Signing  
JOHN A HORST

15. Title of Person Signing  
FCC LICENSE COORDINATOR

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).

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## **12. Description**

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