EXHIBIT B

TECHNICAL INFORMATION

INTELSAT NORTH AMERICA LLC RASCom-1 LEOP STA REQUEST EARTH STATION E040125

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FCC 312 Schedule B		EXHIBIT B								
A		EDERAL COMMUNICA R SATELLITE SPACE A Technical and Opera (Place an "X" in one	ND EAR' ational De	TH STATION escription)		HORIZATIONS				
STA REQUEST Registrat	tion of new Domestic Receive-Only Station	Amendment to a Pending Application	on Mod	ification of License	Registrat	ion Notification of Minor M	odification			
B1. Location of Earth Station S	For VSAT networks	mobile, or VSAT remote facility s attach individual Schedule B, P Communications, and Destinatio	age 1 sheets	s for each hub stati	ion and e	each remote station. Individual	, give its location ly provide the			
	te identifier (HUB, REMOTE	, etc.) B1c. Telephone Number (202)-944-7358				Blj. Geographic Coordinates N/S, Deg Min Sec E/W				
Bld. Mailing Street Address of Station or 22401 Juniper Flats Road	B1e. Name of Contact Person Angelia Maimo				Lat. 33° - 47' - 40.0" N Lon. 117° - 05' - 05.4" W					
Blf. City Nuevo	B1g. County Riverside		B1h. State CA	Bli. Zip Code 92567		B11. Site Elevation (AMSL) 561.75 Meters				
B2. Points of Communications:		orbit locations of all satellites wit ions of all satellite facilities licen								
Satellite Name and Orbit Locati		Satellite Name and Orbit Lo			Satellite Name and Orbit Location					
Rascom 1 LEOP Operations						, III				
							:			

B3. Destination points for comm point(s) (countries) where the serv	nunications using non-U	J.S. licensed satellites. For each this earth station via each non-U	non-U.S. li J.S. license s	censed satellite fa satellite system. U	cility ide Ise addit	entified in section B2 above, sp ional sheets as needed.	ecify the destination			
Satellite Name	List of Destin		<u>-</u>			• -				
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FEDERAL COMMUNICATIONS COMMISSION APPLICATION FOR SATELLITE SPACE AND EARTH STATION AUTHORIZATIONS FCC Form 312 - Schedule B: (Technical and Operational Description)

R4. 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 Transmit and/or Receive (dBi atGHz	
	11.0	1	Vertex RSI	KPC	11.0	55.5 dBi @ 6 GH	
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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.		(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)
11.0		12	573.75			2250	89.0
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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 HUB, 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.

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B6 Frequency Coordination Limits: Use additional pages as needed.

(a) Antenna ID*	(b) Frequency Limits (MHz)	(c) Range of Satellite Arc Eastern Limit**	(d) Range of Satellite Arc Western Limit**	(e) Antenna Elevation Angle Eastern Limit	(f) Antenna Elevation Angle Western Limit	(g) Earth Station Azimuth Angle Eastern Limit	(h) Earth Station Azimuth Angle Western Limit	(i) Maximum EIR Density toward th Horizon (dBW/4kH
11.0	6182.0	0° W	360° W	5.0°	5.0°	LEOP	LEOP	14.7
11.0	6183.5	0° W	360° W	5.0°	5.0°	LEOP	LEOP	14.7
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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.

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B7. Particulars of Operation (Full particulars are required for each r.f. carrier): Use additional pages as needed.

(a) Antenna ID*	(b) Frequency Limits (MHz)	(c) T/R Mode **	(d) Antenna Polarization (H,V,L,R)	(e) Emission Designator	(f) Maximum EIRP per Carrier (dBW)	(g) Maximum EIRP Density per Carrier (dBW/4kHz)	(h) Description of Modulation and Services
11.0	6182.0	Т	Cir. H.V.	850KN0N	89.0	65.7	FM with BPSK subcarrier and PCM data
11.0	6183.5	T	Cir. H.V.	850KN0N	89.0	65.7	FM with BPSK subcarrier and PCM data
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If VSAT Network, provide the SITE-ID (Item B1b) of the station that B8-B13 are in response to (HUB, REMOTE1, etc.): _____

con me	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.									
B9. If the proposed antenna(s) do not operate in the Fixed Satellite Service (FSS), or if they operate in the Fixed Satellite Service										
(FS	s) with non-geostationary satellites,	ns specified in		YES	N/A ∐ NO					
Section 10	ion 25,209(a2) and (b) as demonstrate the facility operated by remote control	of point.				***************************************				
D10.15	me facility operated by remote control	n: 11 1150, provide di	o tobalion and totophon		and the second	П	YES	\bowtie no		
								<u> </u>		
Ì.	Remote Control Point Location:		<u> </u>		<u></u>			·····		
	B10a. Street Address			4						
	7101 6	l r	B10c. County B10.d. State/Country				B10e, Zip Code			
	B10b. City	ļ [_]	310c. County		Divid, Diator Country		2100. 2.1	, 5500		
	B10f. Telephone Number			B10g. Call Sign of Con	trol Station (if appropriate)					
								,		
				\$ 5T. ^4						
B11. Is frequency coordination required? If YES, attach a frequency coordination report as an exhibit.							YES	□NO	,	
							1.120			
B12. Is coordination with another country required? If YES, attach the name of the country(ies)										
and plot of coordination contours as an exhibit.							YES	⊠ no		
B13. FAA Notification - (See 47 CFT Part 17 and 47 CFT Part 25.113(c))								N/ N/O		
Where FAA notification is required, have you attached a copy of a completed FCC Form 854 YES NO								⊠ NO		
and/or the FAA's study regarding the potential hazard of the structure to aviation? EXISTING FACILITY										
FAILURE TO COMPLY WITH 47 CFT PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION										