

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
CGX Application San Diego Earth Station

1. Applicant

Name:	TeleCommunication Systems	Phone Number:	410-349-7097
DBA Name:		Fax Number:	410-295-1884
Street:	275 West Street Suite 400	E-Mail:	kscovill@telecomsys.com
City:	Annapolis	State:	MD
Country:	USA	Zipcode:	21401 -
Attention:	Kim Robert Scovill		



File # SES-STA-20091201-01515
Call Sign E070086 Grant Date 12/3/09
(or other identifier)
Term Dates
From 12/3/09 To: 1/31/2010
Approved: Joanette R. Spriggs

2. Contact

Name:	Kim Robert Scovill	Phone Number:	410-349-7097
Company:	TeleCommunication Systems, Inc.	Fax Number:	410-295-1884
Street:	275 West Street Suite 400	E-Mail:	kscovill@telecomsys.com
City:	Annapolis	State:	MD
Country:	USA	Zipcode:	21401 -
Attention:	Kim Robert Scovill	Relationship:	Same

(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)

3. Reference File Number or Submission ID

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 CGX – Fixed Satellite Transmit/Receive Earth Station

5. Type Request

Use Prior to Grant

Change Station Location

Other

6. Requested Use Prior Date

12/01/2009

7. City San Diego

8. Latitude

(dd mm ss.s h) 32 42 20.4 N

9. State CA	10. Longitude (dd mm ss.s h) 117 15 19.7 W
11. Please supply any need attachments. Attachment 1: Form 159 CGX Attachment 2: VSAT License Letter 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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">Transmission and reception of satellite signals for distribtion on applicant's DHS earth station hub.</div>	
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 Kim Robert Scovill	15. Title of Person Signing Senior Director
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).	

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 instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0678), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE 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 government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This 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.

TeleCommunication Systems, Inc.
275 West Street Annapolis, MD 21401
410-349-7097 kscoவில்@telecomsys.com

November 24, 2009

To: International Bureau
Federal Communications Commission
445 12th Street, SW
Washington, DC 20554

RE: Earth Station Applications of TCS
Requests for STA / Requests for Expedited Treatment

Dear Reviewer:

This application is being made so that TeleCommunication Systems, Inc. (TCS) can comply with a vital disaster recovery / homeland security support contract from the Department of Homeland Security (DHS) effective December 1, 2009.

Via competitive bid, TCS has secured the obligation to provide satellite communications services to DHS over earth station equipment owned by DHS – a situation identical to the previous contract that DHS had with the previous licensed vendor, Knight Sky Consulting and Associates (KSC). From a technical perspective, noting will be changing with the earth stations (owned by DHS) except that TCS will be the vendor instead of KSC.

Because there are no technical, environmental, geographic, power, equipment, frequency, or other changes being made to these earth stations, TCS is requesting both expedited treatment of its application(s) and requests for Special Temporary Authority. TCS also asks that because the earth stations are currently operating without objection, that the existing frequency coordination filings be used for the proforma change in licensing occurring with TCS's applications

To assist with the review of TCS's application, the prior KSC licenses are referenced below:

LICENSEE	LICENSE #	FILE #		
Knight Sky Consulting and Associates	E070086	SES-LIC-INTR2007-01058	Earth Station / Fixed Satellite	C-Band (4/6 GHz)
Knight Sky Consulting and Associates	E060261	SES-LIC-INTR2006-01748	Earth Station / Fixed Satellite VSAT System	Ku-Band (12/14 GHz)

DHS uses this system for vital life saving disaster recovery communications, therefore, an expedited review is in the public interest. In addition, as noted above, there are not substantive technical changes from the prior acceptable license applications other than the party as licensee.

Thank you for your prompt consideration of these requests, and please let me know if you have any questions. My contact information is above.

Sincerely,

Kim Robert Scovill
Senior Director
TeleCommunication Systems, Inc.

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE
FORM 159

Approved by OMB
30642589
Page No. 1 of 2

(1) LOCKBOX #		SPECIAL USE ONLY FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (If paying by credit card enter name exactly as it appears on the card) TeleCommunication Systems, Inc.		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$175.00	
(4) STREET ADDRESS LINE NO. 1 275 West Street			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Annapolis	(7) STATE MD	(8) ZIP CODE 21401	
(9) DAYTIME TELEPHONE NUMBER (include area code) 410-349-7097		(10) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0005049846	(12) FCC USE ONLY		
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)			
COMPLETE SECTION BELOW FOR EACH SERVICE. IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
TeleCommunication Systems, Inc.			
(13) APPLICANT NAME			
(14) STREET ADDRESS LINE NO. 1 275 West Street			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY Annapolis	(17) STATE MD	(18) ZIP CODE 21401	
(19) DAYTIME TELEPHONE NUMBER (include area code) 410-349-7097		(20) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0005049846	(22) FCC USE ONLY		
COMPLETE SECTION C FOR EACH SERVICE. IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID E070086	(24A) PAYMENT TYPE CODE CGX	(25A) QUANTITY 1	(25B) QUANTITY 1
(26A) FEE DUE FOR (PTC) \$175.00	(27A) TOTAL FEE \$175.00	FCC USE ONLY	
(28A) FCC CODE 1	(29A) FCC CODE 2		
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY 1	(25B) QUANTITY 1
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1	(29B) FCC CODE 2		
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT			
I, <u>Kim Rebecca Scoville</u> , 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 <u>Kim R Scoville</u>		DATE <u>11/24/09</u>	
SECTION E - CREDIT CARD PAYMENT INFORMATION			
ACCOUNT NUMBER <u>3799 8956 9411 000</u> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input checked="" type="checkbox"/> DISCOVER <input type="checkbox"/>			
EXPIRATION DATE <u>07/14</u>			
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE <u>Kim R Scoville</u>		DATE <u>11/24/09</u>	