

SES-STA-20121119-01027
Universal Space Network, Inc.

IB2012002677

Approved by OMB
3060-0678

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
Skynet 5D STA 12-19-2012

1. Applicant

Name:	Universal Space Network, Inc.	Phone Number:	215-328-9130
DBA Name:		Fax Number:	215-328-9132
Street:	417 Caredean Drive Suite A	E-Mail:	jgreet@uspacenet.com
City:	Horsham	State:	PA
Country:	USA	Zipcode:	19044 -
Attention:	Joanne Greet		

30 days "With conditions"



File # SES-STA-20121119-01027

Call Sign N/A Grant Date 12/18/2012
(or other identifier)

Term Dates
From 12/18/2012 To: 01/16/2013

Approved: Paul E. Hunt

Conditions of grant of SES-STA-20121119-01027

Universal Space Network Inc. is granted authorization to operate its Naalehu, HI earth station to transmit on 2074.177 MHz and 2080.623 MHz and receive on 2252.500 MHz and 2259.500 MHz center frequencies to support testing prior to launch and the LEOP of the Skynet-5D spacecraft under the following conditions.

1. All operations under the authorization of this STA will be conducted on an unprotected, non-interference basis to Air Force operations.
2. All operations shall be limited to testing prior to launch and Telemetry, Tracking, and Control (TT&C) during the launch and early orbit support (LEOP) of Skynet-5D starting from 17 Dec 2012 thru 15 Jan 2013.
3. This authorization does not grant either market access nor spectrum coordination for any payloads on Skynet-5D.
4. Universal Space Network (USN) will inform NTIA (Skotler@ntia.doc.gov, 202-482-7983) and FCC (Paul.Blais@FCC.gov, 202-418-7274) at least 24 hours prior to the planned operations or if planned operations are delayed.
5. The Universal Space Network Point of Contact for Operation is 215-328-9130 or 808-929-8069 and must be available while the frequencies are in use.
6. Future request need to include the orbital parameters of the satellite being supported since the lack of this information will delay the evaluation and response by several federal agencies and meeting launch dates may be difficult or impossible under some circumstances.

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Term Dates

Approved: [Signature]

2. Contact	
Name: Universal Space Network, Inc.	Phone Number: 215-328-9130
Company:	Fax Number: 215-328-9132
Street: 417 Caredean Drive Suite A	E-Mail: jgreet@uspacenet.com
City: Horsham	State: PA
Country: USA	Zipcode: 19044 -
Attention: Joanne Greet	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? <input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114). <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee <input type="radio"/> Other (please explain):	
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station	
5. Type Request <input checked="" type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input type="radio"/> Other	
6. Requested Use Prior Date 12/10/2012	
7. City Naalehu	8. Latitude (dd mm ss.s h) 19 0 50.3 N

9. State HI	10. Longitude (dd mm ss.s h) 155 39 46.6 W
11. Please supply any need attachments. Attachment 1: Form 312 Attachment 2: Waiver and Analysis Attachment 3: Coordination Study	
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;">Support testing prior to launch and the LEOP support of the Skynet-5D spacecraft currently scheduled for Dec 19, 2012</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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing Joanne Greet	15. Title of Person Signing Manager, Contracts & Compliance
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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