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Callsign/Satellite ID:

APPLICATION FOR EARTH STATION AUTHORIZATIONS	FCC Use Only
FCC 312 MAIN FORM FOR OFFICIAL USE ONLY	

APPLICANT INFORMATION

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

TELEVISA SA de CV MOB-5

1-8. Legal Name of Applicant	
Name: TELEVISA, SA de CV	Phone Number: 2028281860
DBA Name:	Fax Number: 2029555564
Street: 800 17TH STREET NW, STE 1100	E-Mail: NORM.LEVENTHAL@HKLAW.COM
City: WASHINGTON	State:
Country: USA	Zipcode: -
Attention: NORMAN LEVENTHAL ESQ	

9-16. Name of Contact Representative	
Name: NORM LEVENTHAL	Phone Number: 2028281860
Company: HOLLAND & KNIGHT LLP	Fax Number: 2029555564
Street: 800 17TH STREET, N.W. SUITE 1100	E-Mail: NORM.LEVENTHAL@HKLAW.COM
City: WASHINGTON	State: DC
Country: USA	Zipcode: 20006-3906
Attention: NORM LEVENTHAL	Relationship: Legal Counsel

CLASSIFICATION OF FILING

17. Choose the button next to the classification that applies to this filing for both questions a. and b. Choose only one for 17a and only one for 17b. a. <input checked="" type="radio"/> a1. Earth Station (N/A) a2. Space Station	b. <input checked="" type="radio"/> b1. Application for License of New Station <input checked="" type="radio"/> b2. Application for Registration of New Domestic Receive-Only Station (N/A) b3. Amendment to a Pending Application (N/A) b4. Modification of License or Registration (N/A) b5. Assignment of License or Registration (N/A) b6. Transfer of Control of License or Registration (N/A) b7. Notification of Minor Modification (N/A) b8. Application for License of New Receive-Only Station Using Non-U.S. Licensed Satellite (N/A) b9. Letter of Intent to Use Non-U.S. Licensed Satellite to Provide Service in the United States <input checked="" type="radio"/> b10. Other (Please specify) <input checked="" type="radio"/> b11. Application for Earth Station to Access a Non-U.S. satellite Not Currently Authorized to Provide the Proposed Service in the Proposed Frequencies in the United States.
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17c. 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).
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- Governmental Entity Noncommercial educational licensee
 Other (please explain):

17d.
 Fee Classification CYB - Mobile Satellite Earth Stations Individual Earth Station

18. If this filing is in reference to an existing station, enter:
 (a) Call sign of station:
 Not Applicable

19. If this filing is an amendment to a pending application enter:
 (a) Date pending application was filed: (b) File number of pending application:
 Not Applicable Not Applicable

TYPE OF SERVICE

20. NATURE OF SERVICE: This filing is for an authorization to provide or use the following type(s) of service(s): Select all that apply:

- a. Fixed Satellite
 b. Mobile Satellite
 c. Radiodetermination Satellite
 d. Earth Exploration Satellite
 e. Direct to Home Fixed Satellite
 f. Digital Audio Radio Service
 g. Other (please specify)

21. STATUS: Choose the button next to the applicable status. Choose only one.
 Common Carrier Non-Common Carrier

22. If earth station applicant, check all that apply.
 Using U.S. licensed satellites
 Using Non-U.S. licensed satellites

23. If applicant is providing INTERNATIONAL COMMON CARRIER service, see instructions regarding Sec. 214 filings. Choose one. Are these facilities:
 Connected to a Public Switched Network Not connected to a Public Switched Network N/A

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 upper and lower frequencies in MHz.)
 Frequency Lower: Frequency Upper:

TYPE OF STATION

25. CLASS OF STATION: Choose the button next to the class of station that applies. Choose only one.
 a. Fixed Earth Station
 b. Temporary-Fixed Earth Station
 c. 12/14 GHz VSAT Network
 d. Mobile Earth Station
 (N/A) e. Geostationary Space Station
 (N/A) f. Non-Geostationary Space Station
 g. Other (please specify)

26. TYPE OF EARTH STATION FACILITY: Choose only one.
 Transmit/Receive Transmit-Only Receive-Only N/A

PURPOSE OF MODIFICATION

27. The purpose of this proposed modification is to: (Place an 'X' in the box(es) next to all that apply.)
 Not Applicable

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 1.1307? If YES, submit the statement as required by Sections 1.1308 and 1.1311 of the Commission's rules, 47 C.F.R. §§ 1.1308 and 1.1311, as an exhibit to this application. A Radiation Hazard Study must accompany all applications for new transmitting facilities, major modifications, or major amendments. Yes No

ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aeronautical en route or aeronautical fixed radio station services are not required to respond to Items 30-34.

29. Is the applicant a foreign government or the representative of any foreign government?	<input type="radio"/> Yes <input checked="" type="radio"/> No
30. Is the applicant an alien or the representative of an alien?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
31. Is the applicant a corporation organized under the laws of any foreign government?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
32. Is the applicant a corporation of which more than one-fifth of the capital stock is owned of 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?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
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 of 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?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
34. If any answer to questions 29, 30, 31, 32 and/or 33 is Yes, attach as an exhibit an identification of the aliens or foreign entities, their nationality, their relationship to the applicant, and the percentage of stock they own or vote.	ALIEN OWNERSHIP

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.	<input type="radio"/> Yes <input checked="" type="radio"/> No
36. Has the applicant or any party to this application or amendment 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 circumstances.	<input type="radio"/> Yes <input checked="" type="radio"/> No
37. Has the applicant, or any party to this application or amendment, 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 circumstances.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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 radio apparatus, exclusive traffic arrangement or any other means or unfair methods of competition? If Yes, attach as an exhibit, an explanation of circumstances	<input type="radio"/> Yes <input checked="" type="radio"/> No
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.	<input type="radio"/> Yes <input checked="" type="radio"/> No
40. If the applicant is a corporation and is applying for a space station license, attach as an exhibit the names, address, and citizenship of those stockholders owning a record and/or voting 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 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. <i>See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.</i>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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? U.S.	
43. Description. (Summarize the nature of the application and the services to be provided). Televisa is a television company in Mexico City which uses these facilities to cover sporting events in the U.S. for transmission to Mexico City	
43a. Geographic Service Rule Certification By selecting A, the undersigned certifies that the applicant is not subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25.	<input checked="" type="radio"/> A
By selecting B, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will comply with such requirements.	<input type="radio"/> B

By selecting C, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will not comply with such requirements because it is not feasible as a technical matter to do so, or that, while technically feasible, such services would require so many compromises in satellite design and operation as to make it economically unreasonable. A narrative description and technical analysis demonstrating this claim are attached.

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): (Choose the button next to applicable response.)

- Individual
- Unincorporated Association
- Partnership
- Corporation
- Governmental Entity
- Other (please specify)

45. Name of Person Signing William Aquirre Ballesteros	46. Title of Person Signing General Satellite Director of Televisa
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47. Please supply any need attachments.

Attachment 1:	Attachment 2:	Attachment 3:
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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).

**SATELLITE EARTH STATION AUTHORIZATIONS
FCC Form 312 - Schedule B:(Technical and Operational Description)**

FOR OFFICIAL USE ONLY

Location of Earth Station Site			
E1: Site Identifier:	CONUS	E5: Call Sign:	NEW
E2: Contact Name	William Aquirre Ballesteros	E6: Phone Number:	525552247161
E3: Street:	1001 Russell Street	E7: City:	Multiple
E4: State	WA	E8: County:	Seattle
E10: Area of Operation:		E9: Zip Code	98134
E11: Latitude:	47 ° 35 ' 44.07 " N	CENTURYLINK FIELD STADIUM	
E12: Longitude:	122 ° 19 ' 53.54 " W		
E13: Lat/Lon Coordinates are:	<input type="radio"/> NAD-27	<input checked="" type="radio"/> NAD-83	<input type="radio"/> N/A
E14: Site Elevation (AMSL):	5.0 meters		

E15. 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 measurement? If NO, provide a technical analysis showing compliance with two-degree spacing policy.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
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E16. 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?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	<input type="radio"/> Yes <input checked="" type="radio"/> No
E18. Is frequency coordination required? If YES, attach a frequency coordination report as	<input type="radio"/> Yes <input checked="" type="radio"/> No
E19. Is coordination with another country required? If YES, attach the name of the country (ies) and plot of coordination contours as	<input type="radio"/> Yes <input checked="" type="radio"/> No
E20. 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 of the structure to aviation? FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION.	<input type="radio"/> Yes <input checked="" type="radio"/> No

POINTS OF COMMUNICATION

Satellite Name: OTHER OTHER If you selected OTHER, please enter the following:	
E21. Common Name: ALSAT	E22. ITU Name:
E23. Orbit Location:	E24. Country: USA

POINTS OF COMMUNICATION (Destination Points)

E25. Site Identifier: CONUS	
E26. Common Name:	E27. Country: Mexico

ANTENNA

Site ID	E28. Antenna Id	E29. Quantity	E30. Manufacturer	E31. Model	E32. Antenna Size	E41/42. Antenna Gain Transmint and/or Recieve(____ dBi at ____ GHz)	
CONUS	TVSA MOB-5	1	NORSAT	NS-3200	1.0	42.0 dBi at 11.85	
						42.0 dBi at 14.15	
E28. Antenna Id	E33/34. Diameter Minor/Major (meters)	E35. Above Ground Level (meters)	E36. Above Sea Level (meters)	E37. Building Height Above Ground Level (meters)	E38. Total Input Power at antenna flange (Watts)	E39. Maximum Antenna Height Above Rooftop (meters)	E40. Total EIRP for al carriers (dBW)
TVSA MOB-5	1.0/1.0	3.0	18.0	10.0	200.0	1.5	64.0

FREQUENCY

E28. Antenna Id	E43/44. Frequency Bands(MHz)	E45. T/R Mode	E46. Antenna Polarization (H,V,L,R)	E47. Emission Designator	E48. Maximum EIRP per Carrier(dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
TVSA MOB-5	13750 14500	T	Horizontal and Vertical	20MOG2F	53.77	-21.4
E50. Modulation and Services QPSK-SCPC Digital carrier transmitting video and audio service						
TVSA MOB-5	13750 14500	T	Horizontal and Vertical	40M0G2F	56.8	-21.4
E50. Modulation and Services QPSK-SCPC Digital carrier transmitting video and audio service						

FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits	E54/55. Range of Satellite Arc E/W	E56. Earth Station Azimuth Angle	E57. Antenna Elevation Angle	E58. Earth Station Azimuth Angle	E59. Antenna Elevation Angle	E60. Maximum EIRP Density toward the Horizon
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		(MHz)	Limit	Eastern Limit	Eastern Limit	Western Limit	Western Limit	(dBW/4kHz)
TVSA MOB-5	Geostationary	13750 14500	83.0/ 99.2	128.0	28.0	218.0	59.0	21.4

REMOTE CONTROL POINT LOCATION

REMOTE CONTROL POINT LOCATION

E61. Call Sign NOTE: Please enter the callsign of the controlling station, not the callsign for which this application is being filed.		E65. Phone Number	
E62. Street Address			
E63. City	E67. County	E64/68. State/Country	E66. Zip Code

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 0.25 - 24 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-PERF, 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.

ALIEN OWNERSHIP

The applicant, Televisa S.A. de C.V., is a Mexican corporation the majority of whose corporate officers and directors are Citizens of the United Mexican States (“Mexico). Televisa is owned by Grupo Televisa, S.A.B. a Mexican Corporation based in Mexico City. Grupo Televisa is owned by public shareholders located worldwide.

Such ownership by non-U.S. entities is not a bar to the grant of a Temporary Fixed Earth Station authorization. Indeed, Bay City Television, Inc., a sister company, also ultimately owned by Grupo Televisa, itself currently holds such authorizations as well as a 325 permit to transmit local news and other programming electronically to Station XETV(TV), Tijuana, B.C., Mexico (File No. 325-RWL-20130430-00001).

Neither Televisa nor Grupo Televisa are representatives of a foreign government.

Agency Tracking ID:PGC2467474 Authorization Number:261049 Successful Authorization -- Date Paid: 2/21/14 FILE COPY ONLY!!

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #979093	FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE FORM 159 PAGE NO 1 OF 1	APPROVED BY OMB 3060-059 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) HOLLAND & KNIGHT LLP		(3) TOTAL AMOUNT PAID (dollars and cents) \$2315.00
(4) STREET ADDRESS LINE NO. 1 800 17TH STREET, STE. 1100		
(5) STREET ADDRESS LINE NO. 2 TELECOM-C. NAFTALIN		
(6) CITY WASHINGTON		(7) STATE DC
(8) ZIP CODE 20006-3906		
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 202-9553000 x7040		(10) COUNTRY CODE (IF NOT IN U.S.A.) US
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED		
(11) PAYER (FRN) 0004148995		(12) FCC USE ONLY
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 TELEVISA, SA de CV		
(14) STREET ADDRESS LINE NO. 1 800 17TH STREET NW, STE 1100		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY WASHINGTON		(17) STATE -
(18) ZIP CODE -		
(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 2028281860		(20) COUNTRY CODE (IF NOT IN U.S.A.) US
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED		
(21) APPLICANT (FRN) 0016686628		(22) FCC USE ONLY
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET		
(23A) FCC Call Sign/Other ID		(24A) Payment Type Code(PTC) CYB
		(25A) Quantity 1
(26A) Fee Due for (PTC) \$2,315.00		(27A) Total Fee \$2315.00
		FCC Use Only
(28A) FCC CODE 1		(29A) FCC CODE 2 IB2014000306
(23B) FCC Call Sign/Other ID		(24B) Payment Type Code(PTC)
		(25B) Quantity
(26B) Fee Due for (PTC)		(27B) Total Fee
		FCC Use Only
(28B) FCC CODE 1		(29B) FCC CODE 2