

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
Paumalu STA for 5F3

I. Applicant

| | | | |
|-------------------|---|----------------------|---------------------------|
| Name: | Inmarsat Mobile Networks, Inc. | Phone Number: | 202-248-5150 |
| DBA Name: | | Fax Number: | 202-248-5177 |
| Street: | 1101 Connecticut Avenue, NW Suite 1200 | E-Mail: | chris.murphy@inmarsat.com |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 - |
| Attention: | Mr. Chris Murphy | | |


90 days "with conditions"

File # SES-STA-20150326-00182

Call Sign KA25 Grant Date 08/19/2015
(or other identifier)

Term Dates
From 08/20/2015 To 11/17/2015

Approved: [Signature]



Applicant: Inmarsat Mobile Networks, Inc.
Call Sign: KA25
File No.: SES-STA-20150326-00182
Special Temporary Authority (STA)

Inmarsat Mobile Networks, Inc. is granted a STA, for 90 days, to operate its 19-meter antenna earth station, call-sign KA25, in Paumalu, Hawaii to conduct launch and early orbit phase (LEOP) services and provide C-band telemetry, tracking and control (TT&C) functions during electric orbit raising and in-orbit testing (IOT) and drift of the Inmarsat-5 F3 satellite at permanent orbital location 179° E.L., licensed by the UK Space Agency of the United Kingdom. The in-orbit testing location will be 179° E.L. The LEOP and TT&C operation during the IOT will be under the following conditions:

1. The operation of TT&C will be transmitted on 4199.0 and 4199.5 MHz (space-to-Earth) using linear vertical and circular LH and 5926.5 and 6422.5 MHz (Earth-to-space) linear horizontal and circular RH, 89 dBW maximum EIRP within coordinated emission and power limits.
2. All operations shall be on an unprotected and non-harmful interference basis, Inmarsat Mobile Networks, Inc., KA25, shall not cause harmful interference to, and shall not claim protection from, interference caused to it by any other lawfully operating station and it shall cease transmission(s) immediately upon notice of such interference.
3. All operations under this grant of special temporary authority must be on an unprotected and non-harmful interference basis, *i.e.*, Inmarsat Mobile Networks, Inc. must not cause harmful interference to, and shall not claim protection from interference caused to it by, any other lawfully operating station.
4. In the event of any harmful interference under this grant of special temporary authority, Inmarsat Mobile Networks, Inc. must cease operations immediately upon notification of such interference, and must inform the Commission, in writing, immediately of such an event.
5. Any action taken or expense incurred as a result of operations pursuant to this special temporary authority is solely at Inmarsat Mobile Networks, Inc.'s risk.
6. This action is issued pursuant to Section 0.261 of the Commission's rules on delegated authority, 47 C.F.R. § 0.26 1, and is effective immediately



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Term Dates
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Approved: Paul E. Glass

"with conditions"

| | |
|---|---|
| 2. Contact | |
| Name: Inmarsat Mobile Networks, Inc. | Phone Number: 202-248-5150 |
| Company: | Fax Number: 202-248-5177 |
| Street: 1101 Connecticut Avenue, NW Suite 1200 | E-Mail: louis.rosa@inmarsat.com |
| City: Washington | State: DC |
| Country: USA | Zipcode: 20036 - |
| Attention: | Relationship: Legal Counsel |
| (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 type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input checked="" type="radio"/> Other | |
| 6. Requested Use Prior Date 05/27/2015 | |
| 7. City Paumalu | 8. Latitude (dd mm ss.s h) 21 40 14.6 N |

| | |
|---|---|
| 9. State HI | 10. Longitude (dd mm ss.s h) 158 2 3.1 E |
| 11. Please supply any need attachments. Attachment 1: Narrative Attachment 2: Technical Annex 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: 10px; margin: 5px 0;"> Please see attached </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. <div style="text-align: right;"> <input checked="" type="radio"/> Yes <input type="radio"/> No </div> | |
| 14. Name of Person Signing Chris Murphy | 15. Title of Person Signing Director, Government Affairs |
| 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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