Approved by OMB 3060-0678

Date & Time Filed: File Number: ---Callsign/Satellite ID:

#### APPLICATION FOR EARTH STATION AUTHORIZATIONS

FCC 312 MAIN FORM FOR OFFICIAL USE ONLY

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# **APPLICANT INFORMATION**

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

Swarm Wailuku HI Gateway Earth Station Application

1-8. Legal Name of Applicant

Name: Swarm Technologies, Inc. Phone Number: 608-225-3173

DBA

Name: Fax Number:

Street: 845 Madonna Way E-Mail: sara@swarm.space

City: Los Altos State: CA

Country: USA Zipcode: 94024 -

Attention: Dr. Sara Spangelo

Other(please explain):

9-16. Name of Contact Representative

Name: Kalpak Gude Phone Number: 202-437-4484

Company: Swarm Technologies, Inc. Fax Number:

Street: 845 Madonna Way E-Mail: kalpak@swarm.space

City: Los Altos State: CA

Country: USA Zipcode: 94024-

Attention: Kalpak Gude Relationship: Same

## CLASSIFICATION OF FILING

17. Choose the button next to the	b.					
classification that applies to this filing for	b1. Application for License of New Station					
both questions a. and b. Choose only one	b2. Application for Registration of New Domestic Receive-Only Station					
for 17a and only one for 17b.	(N/A) b3. Amendment to a Pending Application					
a.	(N/A) b4. Modification of License or Registration					
	(N/A) b5. Assignment of License or Registration					
a1. Earth Station (N/A) a2. Space Station	(N/A) b6. Transfer of Control of License or Registration					
(N/A) az. Space Station	(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					
	b10. Other (Please specify)					
	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.					
17c. Is a fee submitted with this application	1?					
If Yes, complete and attach FCC Form	ı 159.					
If No, indicate reason for fee exemption (se	ee 47 C.F.R.Section 1.1114).					
Governmental Entity Noncomme	rcial educational licensee					

17d.			
Fee Classification BAX - Fixed S	Satellite Transmit/Receiv	e Earth Station	
18. If this filing is in reference to an	19. If this filing is an amen	dment to a pending ar	onlication enter
existing station, enter:	(a) Date pending application		(b) File number of pending application:
(a) Call sign of station:	(w) 2 and penumg approxima	,	(e) I no name of el ponang approvien.
Not Applicable	Not Applicable		Not Applicable
,	TYPE OF	SERVICE	
20. NATURE OF SERVICE: This filing is	s for an authorization to provi	de or use the followin	ng 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	ne applicable status. Choose	22. If earth station ap	oplicant, check all that apply.
only one.		Using U.S. licen	nsed satellites
Common Carrier Non-Common	Carrier	Using Non-U.S.	licensed satellites
23. If applicant is providing INTERNATION these facilities:	ONAL COMMON CARRIER	S service, see instruction	ons regarding Sec. 214 filings. Choose one. Are
Connected to a Public Switched Netw	work Not connected to a	Public Switched Netw	vork N/A
24. FREQUENCY BAND(S): Place an "2	X" in the box(es) next to all a	oplicable frequency ba	and(s).
a. C-Band (4/6 GHz) b. Ku-Band			•
c.Other (Please specify upper and lov Frequency Lower: 137.00 Frequency Upp			
	TYPE OF	STATION	
25. CLASS OF STATION: Choose the bu	tton next to the class of statio	on that applies. Choose	e 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	n		
g. Other (please specify)			
26. TYPE OF EARTH STATION FACILI			
Transmit/Receive Transmit-Only	y Receive-Only N/A	<u> </u>	
	PURPOSE OF N	MODIFICATION	
27. The purpose of this proposed modific	eation is to: (Place an 'X' in th	e box(es) next to all the	nat apply.)
Not Applicable			
	ENVIRONME	NTAL POLICY	
28. Would a Commission grant of any pre- environmental impact as defined by 47 C 1.1308 and 1.1311 of the Commission's r application. A Radiation Hazard Study modifications, or major amendments.	FR 1.1307? If YES, submit thules, 47 C.F.R. §§ 1.1308 and	ne statement as require 11.1311, as an exhibit	ed by Sections to this Yes No
		<b>C</b> 1	oadcast, common carrier, aeronautical en
29. Is the applicant a foreign government			Ves No

30. Is the applicant an alien or the representative of an alien?		Yes		No	•	N/A
31. Is the applicant a corporation organized under the laws of any foreign government?		Yes		No	•	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?	0	Yes	0	No	•	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?	0	Yes	0	No	•	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.						
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.		Yes	•	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 explination of circumstances.	•	Yes		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 explination of circumstances.	0	Yes	•	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		Yes	•	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 exhinit, an explanation of the circumstances.	0	Yes	•	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. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	•	Yes	0	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.	0	Yes	•	No		
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issu coordinated or is in the process of coordinating the space station?	ied,	what	adn	ninist	ratio	on has
43. Description. (Summarize the nature of the application and the services to be provided). Swarm seeks auth gateway earth station located in Wailuku, HI to communicate with its non-geostationary, nor service system.						tellite
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.	•	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.		В				

○ **C** 

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.

Individual Unincorporated A Partnership Corporation Governmental En Other (please spec	tity cify)	opineable respons			
45. Name of Person Sig Dr. Sara Spangelo	gning		46. Title of Person Sig	gning	
47. Please supply any no	eed attachments.		•		,
Attachment 1:	Atta	chment 2:		Attachment 3:	
(U.S. C	E STATEMENTS MADE (ode, Title 18, Section 1001) Code, Title 47, Section 312	, AND/OR REV	OCATION OF ANY S	TATION AUTHORIZATI	ON
		FOR OFFIC	IAL USE ONLY		
Location of Earth Statio					
E1: Site Identifier:	Wailuku HI Gatew	•	E5. Call Sign:		
E2: Contact Name	Benjamin Longmi		E6. Phone Number:	608-225-3173	
E3. Street:	640 Luakalae Plac		E7. City:	Wailuku	
			E8. County:	Maui	
E4. State	HI		E9. Zip Code	96793	
E10. Area of Operation			Wailuku, HI		
E11. Latitude:	20 ° 54 ' 1.9 " N	7			
E12. Longitude:	156 ° 30 ' 16.6 " W	1	OMAR 25	(A) NI / D (12)	O 37/1
E13. Lat/Lon Coordinate			NAD-27	NAD-83	○ N/A
E14. Site Elevation (AN	MSL):		74.0 meters		
	enna(s) operate in the Fixed		(FSS) with geostationar ed in Section 25.209(a)		○ No N/A

demonstrated by the manufacturer's qualification measurement? If NO, provide as a technical analysis showing compliance with two-degree spacing policy.	
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?	Yes No No N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	• Yes • No
E18. Is frequency coordination required? If YES, attach a frequency coordination report as	○ Yes ● No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	○ Yes ● 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.	Yes No

#### POINTS OF COMMUNICATION

Satellite Name:OTHER   OTHER   If you selected OTHER, please enter the following:				
E21. Common Name: Swarm 1	E22. ITU Name: USASAT-NGSO-7			
E23. Orbit Location: NGSO	E24. Country: USA			

# POINTS OF COMMUNICATION (Destination Points)

E25. Site Identifier: Wailuku HI Gateway	
E26. Common Name:	E27. Country:USA

# ANTENNA

E28. Antenna Id	E29. Quantity	l		E31. Model	E32. Antenna Size			int and/or GHz)	
W1/2	1	Swarm		001	1.1	2.0 dBi at 0.13	8		
						2.0 dBi at 0.14	8		
COLINEAR				002	3.0	5.5 dBi at 0.13	8		
						5.5 dBi at 0.14	8		
QFH				003	1.6	0.0 dBi at 0.13	8		
						0.0 dBi at 0.14	8		
YAGI				004	1.7	11.0 dBi at 0.1	Bi at 0.138		
						11.0 dBi at 0.148			
W1/4				005	0.55	2.0 dBi at 0.13	8		
						2.0 dBi at 0.14	8		
		E35. Above Ground Level (meters)	Abo Sea Lev	ve He a el	ight Above Ground Level	ll .		E40. Total EIRP for al carriers (dBW)	
0.0/0.0		7.1	81.1	6.0		10.0	1.1	12.0	
0.0/0.0		9.0	83.0	6.0	1	10.0	3.0	15.5	
0.0/0.0		7.6	81.6	6.0		10.0	1.6	10.0	
0.0/0.0		7.7	81.7	6.0		10.0	1.7	21.0	
	Antenna Id W1/2 COLINEAR QFH YAGI W1/4 E33/34. Di Minor/Majo 0.0/0.0 0.0/0.0	Antenna Id Quantity W1/2 1  COLINEAR	Manufact   Manufact   Manufact	Antenna Id         Quantity         Manufacturer           W1/2         1         Swarm           COLINEAR	Antenna Id         Quantity         Manufacturer         Model           W1/2         1         Swarm         001           COLINEAR         002         002           QFH         003         003           YAGI         004         005           W1/4         005         005           E35. Above Ground Level (meters)         E36. Above Sea Level (meters)         E36. Above Sea Level (meters)           0.0/0.0         7.1         81.1         6.0           0.0/0.0         7.6         81.6         6.0	Manufacturer   Model   Antenna   Size	Manufacturer   Model   Antenna   E41/42. Anten   Recieve(   M1/2   1   Swarm   001   1.1   2.0 dBi at 0.13	Manufacturer   Model   Antenna   Manufacturer   Model   Antenna   Recieve   dBi at	

YAGI

YAGI

YAGI

YAGI

W1/4

W1/4

W1/4

W1/4

/21/2019	https://lie	censing.fcc	.gov/ibfsweb	o/ib.page.Fe	tchForn	n?id_app_num=1	32043&form=P013_10	1.htm&mode=display
W1/4	0.0/0.0		6.6	80.6	6.0	1	0.0	12.0
FREQUENCY								
E28. Antenna Id	E43/44. Frequency Bands(MHz)	E45. T/R Mode	E46. Polariza	Antennation(H,V		E47. Emission Designator	E48. Maximum EIRP per Carrier(dBW)	E49. Maximum ERIP Density per Carrier(dBW/4kHz)
W1/2	137 138	R	Vertical			125KF1D	0.0	0.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
W1/2	137 138	R	Vertical			7K80F1D	0.0	0.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
W1/2	148 149.95	Т	Vertical			250KF1D	12.0	-6.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
W1/2	148 149.95	Т	Vertical			7K80F1D	12.0	9.1
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
COLINEAR	137 138	R	Vertical			125KF1D	0.0	0.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
COLINEAR	137 138	R	Vertical			7K80F1D	0.0	0.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
COLINEAR	148 149.95	Т	Vertical			250KF1D	15.5	-2.5
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
COLINEAR	148 149.95	T	Vertical			7K80F1D	15.5	12.6
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
QFH	137 138	R	Left Han	d Circula	r	125KF1D	0.0	0.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
QFH	137 138	R	Left Han	d Circula	r	7K80F1D	0.0	0.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
QFH	148 149.95	T	Left Han	d Circula	r	250KF1D	10.0	-8.0
E50. Modulat	tion and Service	s FSK /	data (non	-voice)				
QFH	148 149.95	T	Left Han	d Circula	r	7K80F1D	10.0	7.1

125KF1D

7K80F1D

250KF1D

7K80F1D

125KF1D

7K80F1D

250KF1D

7K80F1D

0.0

0.0

21.0

21.0

0.0

0.0

12.0

12.0

0.0

0.0

3.0

18.1

0.0

0.0

-6.0

9.1

E50. Modulation and Services FSK / data (non-voice)

R

R

Τ

T

137 138

137 138

148 149.95

148 149.95

137 138

137 138

148 149.95

148 149.95

R

R

Vertical

Vertical

Vertical

Vertical

Vertical

Vertical

Vertical

Vertical

### E50. Modulation and Services FSK / data (non-voice)

### FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	ll e	E56. Earth Station Azimuth Angle Eastern Limit	E57. Antenna Elevation Angle Eastern Limit	E58. Earth Station Azimuth Angle Western Limit	Angle Western	toward the
W1/2	Non- Geostationary	137 138	0.0/ 0.0	0.0	5.0	0.0	5.0	0.0
	Non- Geostationary	148 149.95	0.0/ 0.0	0.0	5.0	0.0	5.0	-39.9
COLINEAR	Non- Geostationary	137 138	0.0/ 0.0	0.0	5.0	0.0	5.0	0.0
	Non- Geostationary	148 149.95	0.0/ 0.0	0.0	5.0	0.0	5.0	-44.9
QFH	Non- Geostationary	137 138	0.0/ 0.0	0.0	5.0	0.0	5.0	0.0
	Non- Geostationary	148 149.95	0.0/ 0.0	0.0	5.0	0.0	5.0	-35.9
YAGI	Non- Geostationary	137 138	0.0/ 0.0	0.0	5.0	0.0	5.0	0.0
	Non- Geostationary	148 149.95	0.0/ 0.0	0.0	5.0	0.0	5.0	-47.9
W1/4	Non- Geostationary	137 138	0.0/ 0.0	0.0	5.0	0.0	5.0	0.0
	Non- Geostationary	148 149.95	0.0/ 0.0	0.0	5.0	0.0	5.0	-39.9

# REMOTE CONTROL POINT LOCATION REMOTE CONTROL POINT LOCATION

E61. Call Sign	E65. Phone Number			
E190610		608-225-3173		
NOTE: Please enter the callsign of the controlling station, not the callsig is being filed.				
E62. Street Address 435 N Whisman Road Ste. 100				
E63. City Mountain View	E67. County Santa Clara	E64/68. State/Country CA/ USA	E66. Zip Code 94043	

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