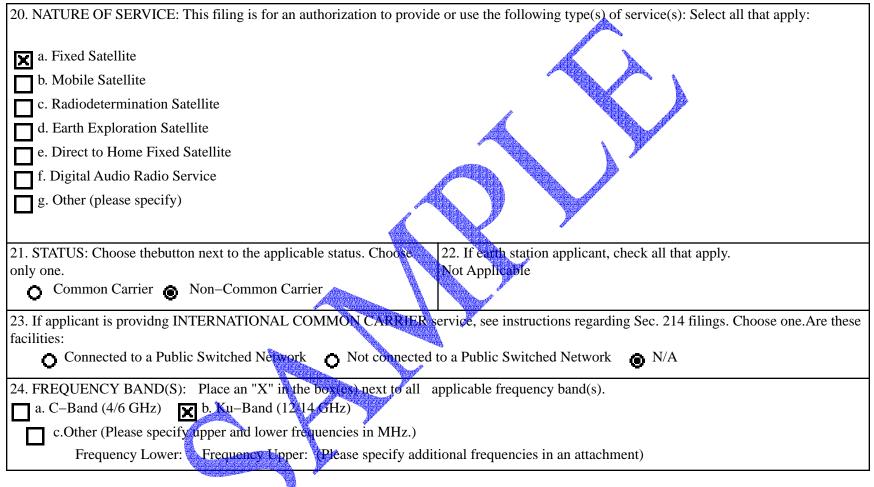


9–16. Name of Contact Representative (If	other than applicant)	
Name: Major Law Firm Pho	one Number:	202-555-1111
Company: Fax Number:		202-555-1112
Street: 100 I Street, NW	E–Mail:	
City: Washington	State:	
Country: USA	Zipcode:	20020-2020
Contact Title: Attorney	Relationship:	Legal Counsel
CLASSIFICATION OF FILING		
 17. Choose the buttonnext to the classification that applies to thisfiling for both questions a. and b. Choose only one for 17a and only one for 17b. a. (N/A) a1. Earth Station a2. Space Station 	 (N/A) b3. Amendment to a Pending A (N/A) b4. Modification of License of I (N/A) b5. Assignment of License of I (N/A) b6. Transfer of Control of Lice (N/A) b7. Notification of Minor Mod (N/A) b8. Application for License of b9. Letter of Intent to Use Non-U b10. Replacement Satellite Application 	on of New Domestic Receive–Only Station Application Registration Registration ense or Registration dification New Receive–Only Station Using Non–U.S. Licensed Satellite J.S. Licensed Satellite to Provide Service in the United States cation – no new frequency bands cation – new frequency bands (Not eligible for streamlined

17c. Is a fee submitted with this applicat	ion?
If Yes, complete and attach FCC Form	159.
If No, indicate reason for fee exemption Governmental Entity Noncom	
• Other(please explain): Application fi	led pursuant to DA 03–3633
17c. Fee Classification BNY – Space Station (Geostationary)	Number of Satellite: 1
18. If this filing is in reference to an existin(a) Call sign of station: Not Applicable	ng station, enter:
19. If this filing is an amendment to a pend(a) Date pending application was filed:	ling application enter: (b) File number of pending application:
Not Applicable	Not Applicable

TYPE OF SERVICE



TYPE OF STATION

. CLASS OF STATION: Choose the button next to the class of station that applies. Choose only one.	
 I/A) a. Fixed Earth Station I/A) b. Temporary–Fixed Earth Station I/A) c. 12/14 GHz VSAT Network I/A) d. Mobile Earth Station 	
e. Geostationary Space Station. Number of Satellites: 1 (Note: Please fill in the number of satellites for GSO license application	18
NLY. Otherwise, leave blank.)	
f. Non–Geostationary Space Station	
g. Other (please specify)	
. TYPE OF EARTH STATION FACILITY: Not Applicable	
JRPOSE OF MODIFICATION	
7. The purpose of this proposed modification is to: (Place an "X" in the box(es) next to all that Not Applicable	
pply.)	
NVIRONMENTAL POLICY	
3. Would a Commission grant of any proposal in this application or amendment have a significant environmental 👩 Yes 👩 No	
pact as defined by 47 CFR 1.13072 If YES, submit the statement as required by Sections 1.1308 and 1.1311 of	
e Commission's rules, 47 C.F.R. §§ 1.1308 and 1.1311, as an exhibit to this application. A Radiation Hazard	
udy must accompany all applications for new transmitting facilities, major modifications, or major amendments.	
LIEN OWNERSHIP	

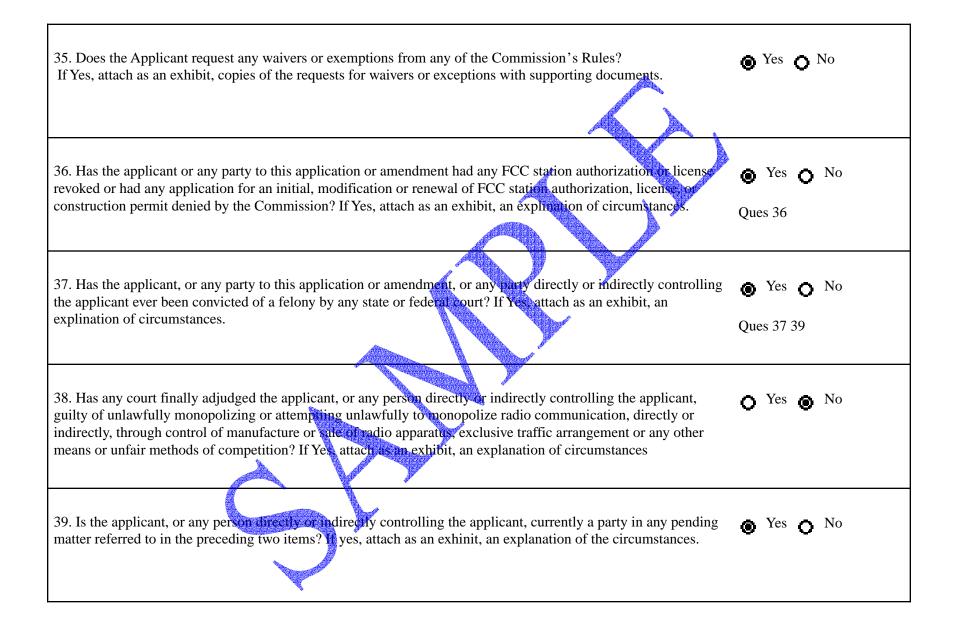
ALIEN OWNERSHIP

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.



BASIC QUALIFICATIONS



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 (res) or class of Ques 40 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.
42a. Does the applicant intend to use a non–U.S. licensed satellite to provide service in the United States? If Yes, O Yes O No 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.
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?

43. Description. (Summarize the nature of the application and the services to be provided). (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

This application replaces Solomon's previo Communications also had requested authority	
Attach	
CERTIFICATION	
United States because of the previous use of the same, whether by li application. The applicant certifies that grant of this application wou in 47 CFR Part 20. All statements made in exhibits are a material pa	cy or of the electromagnetic spectrum as against the regulatory power of the cense or otherwise, and requests an authorization in accordance with this ild not cause the applicant to be in violation of the spectrum aggregation limit rt hereof and are incorporated herein as if set out in full in this application. that all statements made in this application and in all attached exhibits are tlief, and are made in good faith.
44. Applicant is a (an): (Choose the button next to applicable res	ponse.)
 Individual Unincorporated Association 	
O Partnership	
Orporation	
Governmental Entity	
Other (please specify)	
45. Name of Person Signing MJ Solomon	46. Title of Person Signing President

47. Please supply any ne	eed attachments.		
1:	2:	3:	
		and the second sec	
(U	FALSE STATEMENTS MADE ON THIS FORM ARE U.S. Code, Title 18, Section 1001), AND/OR REVOCA U.S. Code, Title 47, Section 312(a)(1)), AND/OR FOR	Tourse and the second second	

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