

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	FCC Use Only
---	---------------------

APPLICANT INFORMATION

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

Tiger Communications Auburn AL Earth Station

1-8. Legal Name of Applicant	
Name: Tiger Communications, Inc.	Phone Number: 334-887-9999
DBA Name:	Fax Number:
Street: 2514 S. College Suite 104	E-Mail: brooke@thetiger.fm
City: Auburn	State: AL
Country: USA	Zipcode: 36830 -
Attention: Brooke Myers	
9-16. Name of Contact Representative	
Name: James Ricky Carter	Phone Number: 334-790-6964
Company:	Fax Number:
Street: 1246 Old Columbia Rd	E-Mail: rickycarter@gmail.com
City: Columbia	State: AL
Country: USA	Zipcode: 36319-
Attention: Ricky Carter	Relationship: Engineer

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.	b.
	<input checked="" type="checkbox"/> b1. Application for License of New Station
	<input checked="" type="checkbox"/> b2. Application for Registration of New Domestic Receive-Only Station
a.	(N/A) b3. Amendment to a Pending Application
<input checked="" type="checkbox"/> a1. Earth Station	(N/A) b4. Modification of License or Registration
(N/A) a2. Space Station	(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="checkbox"/> b10. Other (Please specify) <input checked="" type="checkbox"/> 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?

If Yes, complete and attach FCC Form 159.

If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).

Governmental Entity Noncommercial educational licensee

Other (please explain):

17d.
Fee Classification CMO - Receive Only 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: Not Applicable	(b) File number of pending application: 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. <input checked="" type="checkbox"/> Common Carrier <input checked="" type="checkbox"/> Non-Common Carrier	22. If earth station applicant, check all that apply. <input checked="" type="checkbox"/> Using U.S. licensed satellites <input checked="" type="checkbox"/> 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? Yes No

30. Is the applicant an alien or the representative of an alien? Yes No

N/A

<p>31. Is the applicant a corporation organized under the laws of any foreign government?</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p>
<p>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?</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p>
<p>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?</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p>
<p>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.</p>	

BASIC QUALIFICATIONS

<p>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.</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>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.</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>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.</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>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</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>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.</p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>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.</p>	
<p>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></p>	<p><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

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. Yes 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?

43. Description. (Summarize the nature of the application and the services to be provided). **Registration of Domestic Receiver-Only Earth Station for Tiger Communications located and serving Auburn Alabama.**

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. 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. C

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

46. Title of Person Signing

James Ricky Carter	Engineer
--------------------	----------

47. Please supply any need attachments.

Attachment 1:	Attachment 2:	Attachment 3:
---------------	---------------	---------------

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:	Tiger Comm Auburn AL	E5: Call Sign:	
E2: Contact Name	Brooke Myers	E6: Phone Number:	334-887-9999
E3: Street:	2514 S College St Suite 104	E7: City:	Auburn
E4: State	AL	E8: County:	USA
E10: Area of Operation:		E9: Zip Code	36832
E11: Latitude:	32 ° 33 ' 17.68 " N		
E12: Longitude:	85 ° 30 ' 32.78 " W		
E13: Lat/Lon Coordinates are:	<input checked="" type="checkbox"/> NAD-27	<input checked="" type="checkbox"/> NAD-83	<input checked="" type="checkbox"/> N/A
E14: Site Elevation (AMSL):	169.164 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="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Yes	No	N/A

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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Yes	No	N/A

E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	No
	Yes		

E18. Is frequency coordination required? If YES, attach a frequency coordination report as	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	No
	Yes		

E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	No
	Yes		

			/					
--	--	--	---	--	--	--	--	--

**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-PER, 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.