

Reference Copy Only. Do Not Mail to the FCC as an Application.

FB Docket 12-296

Submitted: 09/27/2012 at 18:50:28
File Number: 0005424221

FCC 601
Main Form

FCC Application for Radio Service Authorization:
Wireless Telecommunications Bureau
Public Safety and Homeland Security Bureau

Approved by OMB
3060 - 0798

See instructions for
public burden estimate

1) Radio Service Code: MM	1a) Existing Radio Service Code:
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General Information

2) (Select only one) (MD)	
NE - New	RO - Renewal Only AU - Administrative Update NT - Required Notifications
MD - Modification	RM - Renewal/Modification WD - Withdrawal of Application EX - Requests for Extension of Time
AM - Amendment	CA - Cancellation of License DU - Duplicate License RL - Registered Location/Link
3a) If this application is for a <u>D</u> evelopmental License, <u>D</u> emonstration License, or a <u>S</u> pecial Temporary Authorization (STA), enter the code and attach the required exhibit as described in the instructions. Otherwise enter ' <u>N</u> ' (Not Applicable).	(N) <u>D</u> <u>M</u> <u>S</u> <u>N/A</u>
3b) If this application is for Special Temporary Authority due to an emergency situation, enter 'Y'; otherwise enter 'N'. Refer to Rule 1.915 for an explanation of situations considered to be an emergency.	(<input type="checkbox"/>) <u>Yes</u> <u>No</u>
4) If this application is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.	File Number
5) If this application is for a Modification, Renewal Only, Renewal/Modification, Cancellation of License, Duplicate License, or Administrative Update, enter the call sign of the existing FCC license. If this is a request for Registered Location/Link, enter the FCC call sign assigned to the geographic license.	Call Sign WQMN726
6) If this application is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).	MM DD /
7) Is this application "major" as defined in §1.929 of the Commission's Rules when read in conjunction with the applicable radio service rules found in Parts 22 and 90 of the Commission's Rules? (NOTE: This question only applies to certain site-specific applications. See the instructions for applicability and full text of §1.929).	(<input type="checkbox"/>) <u>Yes</u> <u>No</u>
8) Are attachments (other than associated schedules) being filed with this application?	(Y) <u>Yes</u> <u>No</u>

Fees, Waivers, and Exemptions

9) Is the Applicant exempt from FCC application fees?	(N) <u>Yes</u> <u>No</u>
10) Is the Applicant exempt from FCC regulatory fees?	(N) <u>Yes</u> <u>No</u>
11a) Does this application include a request for a Waiver of the Commission's Rule(s)? If 'Yes', attach an exhibit providing rule number(s) and explaining circumstances.	(N) <u>Yes</u> <u>No</u>
11b) If 11a is 'Y', enter the number of rule sections involved.	Number of Rule Section(s):
12) Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?	(N) <u>Yes</u> <u>No</u>

Applicant Information

13) FCC Registration Number (FRN): 0005883996			
14) Applicant/Licensee legal entity type: (Select One)			
<input type="checkbox"/> Individual	<input type="checkbox"/> Corporation	<input type="checkbox"/> Unincorporated Association	<input type="checkbox"/> Trust
<input type="checkbox"/> Consortium	<input type="checkbox"/> General Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Liability Partnership
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other (Description of Legal Entity)		
15) If the licensee name is being updated, is the update a result from the sale (or transfer of control) of the license(s) to another party and for which proper Commission approval has not been received or proper notification not provided?			() <u>Yes</u> <u>No</u>
16) First Name (if individual):	MI:	Last Name:	Suffix:
17) Legal Entity Name (if other than individual): LightSquared Subsidiary LLC			
18) Attention To: Mr. Jeffrey J. Carlisle			
19) P.O. Box:	And/Or	20) Street Address: 10802 Parkridge Boulevard	
21) City: Reston		22) State: VA	23) Zip Code: 20191
24) Telephone Number: (703)390-2001		25) FAX: (703)390-6113	
26) E-Mail Address: jeff.carlisle@lightsquared.com			

27) Demographics (Optional):

Race:	Ethnicity:	Gender:
<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Male
<input type="checkbox"/> Asian	<input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Female
<input type="checkbox"/> Black or African-American		
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander		
<input type="checkbox"/> White		

Real Party in Interest

28) Name of Real Party in Interest of Applicant (If different from applicant):	29) FCC Registration Number (FRN) of Real Party in Interest:

Contact Information (If different from the applicant)

30) First Name: John	MI: P	Last Name: Janka	Suffix: Esq
31) Company Name: Latham & Watkins LLP			
32) Attention To:			
33) P.O. Box:	And /Or	34) Street Address: 555 Eleventh Street, N.W., Suite 1000	
35) City: Washington		36) State: DC	37) Zip Code: 20004
38) Telephone Number: (202)637-2200		39) FAX: (202)637-2201	
40) E-Mail Address:			

Regulatory Status

41) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply):

() Common Carrier () Non-Common Carrier () Private, internal communications () Broadcast Services () Band Manager

Type of Radio Service

42) This filing is for authorization to provide the following type(s) of radio service (choose all that apply):

() Fixed () Mobile () Radiolocation () Satellite (sound) () Broadcast Services

43) Does the Applicant propose to provide service interconnected to the public telephone network? () Yes No

Alien Ownership Questions (If any answer is 'Y', provide an attachment explaining the circumstances)

44) Is the Applicant a foreign government or the representative of any foreign government? () Yes No

45) Is the Applicant an alien or the representative of an alien? () Yes No

46) Is the Applicant a corporation organized under the laws of any foreign government? () Yes No

47) 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? () Yes No

48a) Is the Applicant 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? () Yes No

48b) If the answer to 48a is 'Y', has the Applicant received a ruling(s) under Section 310(b)(4) of the Communications Act with respect to the same radio service involved in this application? () Yes No

If the answer to 48b is 'Y', include in the exhibit required by Item 48a the citation(s) of the applicable declaratory ruling(s) by DA/FCC number of the FCC Record citation, if available, release date, and any other identifying information.

If the answer to 48b is 'N', attach to this filing a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act. It is not necessary to file a request for a foreign ownership ruling if the Applicant includes in the exhibit required by Item 48a a showing that the requested license(s) is exempt from the provisions of Section 310(b)(4).

Basic Qualification Questions

49) Has the Applicant or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construction permit denied by the Commission? () Yes No

50) Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a felony by any state or federal court? () Yes No

51) Has any court finally adjudged the Applicant or any party 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? () Yes No

If the answer to any of 49-51 is 'Y', attach an exhibit explaining the circumstances.

Aeronautical Advisory Station (Unicom) Certification

52) () I certify that the station will be located on property of the airport to be served, and, in cases where the airport does not have a control tower, RCO, or FAA flight service station, that I have notified the owner of the airport and all aviation service organizations located at the airport within ten days prior to application.

Broadband Radio Service and Educational Broadband Service Cable Cross-Ownership

53a) Will the requested facilities be used to provide multichannel video programming service? () Yes No

53b) If the answer to question 53a is 'Y', does the Applicant operate, control or have an attributable interest (as defined in Section 27.1202 of the Commission's Rules) in a cable television system whose franchise area is located within the geographic service area of the requested facilities? () Yes No

Note: If the answer to question 53b is 'Y', attach an exhibit explaining how the Applicant complies with Section 27.1202 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission Rule(s) is being requested, Item 11a must be answered 'Y'.

Broadband Radio Service and Educational Broadband Service (Part 27)

54) (For EBS only) Does the Applicant comply with the programming requirements contained in Section 27.1203 of the Commission's Rules? () Yes No

Note: If the answer to item 54 is 'N', attach an exhibit explaining how the Applicant complies with Section 27.1203 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission Rule(s) is being requested, Item 11a must be answered 'Y'.

55) (For BRS and EBS) Does the Applicant comply with Sections 27.50, 27.55, and 27.1221 of the Commission's Rules? () Yes No

Note: If the answer to item 55 is 'N', attach an exhibit justifying a waiver of that rule(s). If a waiver of the Commission Rule(s) is being requested, Item 11a must be answered 'Y'.

General Certification Statements

1)	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.
2)	The applicant certifies that grant of this application would not cause the applicant to be in violation of any pertinent cross-ownership or attribution rules.* *If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
3)	The applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
4)	The applicant certifies that neither the applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR § 1.2002(c). See §1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
5)	The applicant certifies that it either (1) has current required ownership data on file with the Commission, (2) is filing updated ownership data simultaneously with this application, or (3) is not required to file ownership data under the Commission's rules.
6)	The applicant certifies that the facilities, operations, and transmitters for which this authorization is hereby requested are either: (1) categorically excluded from routine environmental evaluation for RF exposure as set forth in 47 C.F.R. 1.1307(b); or, (2) have been found not to cause human exposure to levels of radiofrequency radiation in excess of the limits specified in 47 C.F.R. 1.1310 and 2.1093; or, (3) are the subject of one or more Environmental Assessments filed with the Commission.
7)	The applicant certifies that it has reviewed the appropriate Commission rules defining eligibility to hold the requested license(s), and is eligible to hold the requested license(s).
8)	The applicant certifies that it is not in default on any payment for Commission licenses and that it is not delinquent on any non-tax debt owed to any federal agency.

Signature

56) Typed or Printed Name of Party Authorized to Sign

First Name: Jeffrey	MI: J	Last Name: Carlisle	Suffix:
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57) Title: EVP, Regulatory Affairs and Public Polic

Signature: Jeffrey J Carlisle	58) Date: 09/27/2012
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FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.

Upon grant of this license application, the licensee may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in termination of the license. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of license requested in this application.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).

Market/Channel Block

1) Market Designator	2) Market Name	3) Channel Block	4) Sub-Market Designator	5) Percentage of Bidding Credit	6) Open/Closed Bidding	7) I Am Seeking A Tribal Lands Bidding Credit In This Market
NW	Nationwide	71000-76000 81000-86000 92000-94000 94100-95000	0			() Yes () No

TRIBAL LANDS INFORMATION - Complete only when attaching the required certification(s) from the tribal government(s)

8) Market Designator	9) Channel Block	10) Name of Tribal Lands	11) Area, in square kms, of tribal lands contained within designated market	12) Indicate with an "x" those tribal lands where applicant has secured the required certification(s) from the tribal governments [attach certification(s)]	13) The amount of bidding credit as defined by FCC Rules (by Market)	14) Additional amount of bidding credit requested (attach justification)

15) Agreement Identifier: Action Requested: Add Delete
Type of Agreement: Collusion-Based Designated Entity Other (Description of Type of Agreement) _____

Agreement Name: _____

Party(ies) to Agreement(s)

Action Requested: Add Delete

<input type="checkbox"/> Entity Name:	Legal Entity Name			FCC Registration Number (FRN):		
<input type="checkbox"/> Individual Name:	First	MI	Last	Suffix		
FCC Registration Number (FRN): _____						

Designated Entity/Closed Bidding Agreement Info

16) Have you entered into any agreements which would impact your Designated Entity or closed bidding status? If 'Y', attach an exhibit.	() Yes No
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17) Additional Demographic Information (Not Required)

Applicant Status:
<input type="checkbox"/> Minority Owned Business <input type="checkbox"/> Rural Telephone Company <input type="checkbox"/> Woman Owned Business

Revenue and Asset Information

18) Has any Revenue and Asset information changed for the Applicant, the Disclosable Interest Holder, or the Affiliate? If 'Y', explain why in an exhibit.	() Yes No
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19) Revenue and Asset Information for the Applicant**Purpose (Check Modify and complete all changes different from previously filed FCC Form 175)**

<input type="checkbox"/> Modify

Gross Revenue Disclosure Most Recent Reportable Year

20a) Were the Applicant and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() Yes No
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If 'Y', provide the following information.	
20b) Gross Revenues	\$ _____ (Format: 99,999.99)
20c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

One Year Prior to Most Recent Reportable Year

21a) Were the Applicant and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() Yes No
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If 'Y', provide the following information.	
21b) Gross Revenues	\$ _____ (Format: 99,999.99)
21c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Two Years Prior to Most Recent Reportable Year

22a) Were the Applicant and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() Yes No
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If 'Y', provide the following information.	
22b) Gross Revenues	\$ _____ (Format: 99,999.99)
22c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Average Gross Revenue

23) Average Gross Revenue of Reported Years: \$ _____ (Format: 99,999.99)

Asset Disclosure

24) Total Assets as of Application Filing Deadline: \$ _____ (Format: 99,999.99)
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Financial Statement

25) Audited or Unaudited (Check One)
<input type="checkbox"/> The Applicant used audited financial statements.
<input type="checkbox"/> The Applicant used unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by the Applicant's chief financial officer or the equivalent.

**FCC 601
Schedule B**

**26) Revenue and Asset Information for the Disclosable Interest Holder (DIH)
Purpose (Select One)**

<input type="checkbox"/> Add	<input type="checkbox"/> Modify	<input type="checkbox"/> Delete
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27) Disclosable Interest Holder

<input type="checkbox"/> Entity Name:			FCC Registration Number (FRN):
<input type="checkbox"/> Individual Name: First	MI	Last	Suffix FCC Registration Number (FRN):

Gross Revenue Disclosure Most Recent Reportable Year

28a) Were the DIH and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> <u>No</u>
If 'Y', provide the following information.	
28b) Gross Revenues	\$ _____ (Format: 99,999.99)
28c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

One Year Prior to Most Recent Reportable Year

29a) Were the DIH and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> <u>No</u>
If 'Y', provide the following information.	
29b) Gross Revenues	\$ _____ (Format: 99,999.99)
29c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Two Years Prior to Most Recent Reportable Year

30a) Were the DIH and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> <u>No</u>
If 'Y', provide the following information.	
30b) Gross Revenues	\$ _____ (Format: 99,999.99)
30c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Average Gross Revenue

31) Average Gross Revenue of Reported Years: \$ _____ (Format: 99,999.99)

Asset Disclosure

32) Total Assets as of Application Filing Deadline: \$ _____ (Format: 99,999.99)
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Financial Statements

33) Audited or Unaudited (Check One)
<input type="checkbox"/> The Disclosable Interest Holder used audited financial statements.
<input type="checkbox"/> The Disclosable Interest Holder used unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by the DIH's chief financial officer or the equivalent.

**FCC 601
Schedule B**

**26) Revenue and Asset Information for the Disclosable Interest Holder (DIH)
Purpose (Select One)**

<input type="checkbox"/> Add	<input type="checkbox"/> Modify	<input type="checkbox"/> Delete
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27) Disclosable Interest Holder

<input type="checkbox"/> Entity Name:			FCC Registration Number (FRN):
<input type="checkbox"/> Individual Name: First	MI	Last	Suffix FCC Registration Number (FRN):

Gross Revenue Disclosure Most Recent Reportable Year

28a) Were the DIH and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> <u>No</u>
If 'Y', provide the following information.	
28b) Gross Revenues	\$ _____ (Format: 99,999.99)
28c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

One Year Prior to Most Recent Reportable Year

29a) Were the DIH and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> <u>No</u>
If 'Y', provide the following information.	
29b) Gross Revenues	\$ _____ (Format: 99,999.99)
29c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Two Years Prior to Most Recent Reportable Year

30a) Were the DIH and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> <u>No</u>
If 'Y', provide the following information.	
30b) Gross Revenues	\$ _____ (Format: 99,999.99)
30c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Average Gross Revenue

31) Average Gross Revenue of Reported Years: \$ _____ (Format: 99,999.99)

Asset Disclosure

32) Total Assets as of Application Filing Deadline: \$ _____ (Format: 99,999.99)
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Financial Statements

33) Audited or Unaudited (Check One)
<input type="checkbox"/> The Disclosable Interest Holder used audited financial statements.
<input type="checkbox"/> The Disclosable Interest Holder used unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by the DIH's chief financial officer or the equivalent.

**FCC 601
Schedule B**

**34) Revenue and Asset Information for the Affiliate
Purpose (Select One)**

<input type="checkbox"/> Add	<input type="checkbox"/> Modify	<input type="checkbox"/> Delete
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35) Affiliate

<input type="checkbox"/> Entity Name:				FCC Registration Number (FRN):
<input type="checkbox"/> Individual Name: First	MI	Last	Suffix	FCC Registration Number (FRN):

Gross Revenue Disclosure Most Recent Reportable Year

36a) Were the Affiliate and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> No
If 'Y', provide the following information.	
36b) Gross Revenues	\$ _____ (Format: 99,999.99)
36c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

One Year Prior to Most Recent Reportable Year

37a) Were the Affiliate and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> No
If 'Y', provide the following information.	
37b) Gross Revenues	\$ _____ (Format: 99,999.99)
37c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Two Years Prior to Most Recent Reportable Year

38a) Were the Affiliate and any predecessors-in-interest in existence for a full year of the relevant period? If 'N', explain why in an attachment.	() <u>Yes</u> No
If 'Y', provide the following information.	
38b) Gross Revenues	\$ _____ (Format: 99,999.99)
38c) Year End Date:	_____ (Date Format: MM/DD/YYYY)

Average Gross Revenue

39) Average Gross Revenue of Reported Years: \$ _____ (Format: 99,999.99)

Asset Disclosure

40) Total Assets as of Application Filing Deadline: \$ _____ (Format: 99,999.99)
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Financial Statements

41) Audited or Unaudited (Check One)
<input type="checkbox"/> The Affiliate used audited financial statements.
<input type="checkbox"/> The Affiliate used unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by the Affiliate's chief financial officer or the equivalent.

**FCC 601
Schedule B**

Closed Bidding/Designated Entity Eligibility

Total Gross Revenues for Most Recent Reportable Year

42a) Gross Revenues	\$ _____	(Format: 99,999.99)
42b) Year End Date:	_____	(Date Format: MM/DD/YYYY)

Total Gross Revenues for One Year Prior to Most Recent Reportable Year

43a) Gross Revenues:	\$ _____	(Format: 99,999.99)
43b) Year End Date:	_____	(Date Format: MM/DD/YYYY)

Total Gross Revenues for Two Years Prior to Most Recent Reportable Year

44a) Gross Revenues:	\$ _____	(Format: 99,999.99)
44b) Year End Date:	_____	(Date Format: MM/DD/YYYY)

Total Aggregate Average Gross Revenues for Designated Entity

45) Aggregate Average Gross Revenue:	\$ _____	(Format: 99,999.99)
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Total Aggregate Average Gross Revenues for Closed Bidding

46) Aggregate Average Gross Revenue:	\$ _____	(Format: 99,999.99)
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Total Assets Disclosure for Closed Bidding

47) Total Assets:	\$ _____	(Format: 99,999.99)
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Certifications (By signing the Main Form, the applicant certifies that the statements listed are true, complete, correct and made in good faith)

For Applicants Claiming Eligibility as an Entrepreneur Under the General Rule

Applicant certifies that they are eligible to obtain the licenses for which they apply.

For Applicants Claiming Eligibility as a Publicly Traded Corporation

Applicant certifies that they are eligible to obtain the licenses for which they apply and that they comply with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

For Applicants Claiming Eligibility using a Control Group Structure

Applicant certifies that they are eligible to obtain the licenses for which they apply.

Applicant certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

For Applicants Claiming Eligibility as a Very Small Business, Very Small Business Consortium, Small Business, or as a Small Business Consortium

Applicant certifies that they are eligible to obtain the licenses for which they apply.

Applicant certifies that the applicant's sole control group member is a pre-existing entity, if applicable.

For Applicants Claiming Eligibility as a Rural Telephone Company

Applicant certifies that they meet the definition of a Rural Telephone Company as set out in the applicable FCC rules, and must disclose all parties to agreement(s) to partition licenses won in this auction. See applicable FCC rules.

For Applicants Claiming Tribal Lands Bidding Credit

Applicant certifies that it will comply with the bidding credit buildout requirements and consult with the tribal government(s) regarding the siting of facilities and deployment of service on the tribal land(s) as set out in the applicable FCC rules.

For Auction Applicants

Applicant provided separate gross revenue information for itself, for each of Applicant's officers and directors; for each of Applicant's other controlling interests; for each of Applicant's affiliates; and for each affiliate of each of Applicant's officers, directors, and other controlling interests.

Applicant provided separate gross revenue and total asset information for itself, for each of Applicant's officers and directors; for each of Applicant's other controlling interest; for each of Applicant's affiliates; and for each affiliate of each Applicant's officers, directors, and other controlling interests.

Attachment(s):

Type	Description	Date Entered
O	<u>Exhibit A</u>	09/27/2012
O	<u>LightSquared September 24 Letter</u>	09/27/2012

Exhibit A

As explained in more detail in the *pro forma* transfer of control application it filed on May 24, 2012, ULS File No. 0005227714, LightSquared Subsidiary LLC (“LightSquared”) is now operating as a debtor in possession pursuant to petitions for relief filed under Chapter 11 of Title 11 of the United States Code in the United States Bankruptcy Court for the Southern District of New York. LightSquared continues to operate its business and manage its properties as a debtor in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.

LightSquared has submitted to the Commission the enclosed letter detailing its views on the continued applicability of the build-out milestones in the Harbinger Transfer Order. Solely to facilitate Commission processing of that letter with respect to the relationship of the Harbinger Transfer Order to this specific authorization, LightSquared also is submitting that letter here as a corresponding request for modification of this authorization.