



# NIGERIAN COMMUNICATIONS COMMISSION

## SPACE STATION LANDING PERMIT APPLICATION FORM

### Part 1: General Information

#### Applicant Information

Name of Company: \_\_\_\_\_

Company Representative: \_\_\_\_\_  
*Last name First name Middle name*

Position Held: \_\_\_\_\_

Company Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_ *City State P.O. Box/Zip Code*

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_ Country: \_\_\_\_\_

### Part 2: Technical Parameters

#### Space Station Parameters

Name of Space Satellite: \_\_\_\_\_

Orbital Type: GSO  Non-GSO  Others (Please specify): \_\_\_\_\_

Orbital Position (If applicable):

Degree E: \_\_\_\_\_  Degree W: \_\_\_\_\_

Launch Parameters:

Satellite Launch Date: \_\_\_\_\_

Satellite Life Span: \_\_\_\_\_

Satellite Constellation: YES  NO

If yes, how many Satellites launched at time of application for Landing Rights: \_\_\_\_\_

How many Satellite's to be launched in total: \_\_\_\_\_

Satellite (Constellation) Altitude: \_\_\_\_\_ Orbital Planes: \_\_\_\_\_

Type of Space Station:

Fixed Satellite Service:  Mobile Satellite Service:  Others (Please Specify): \_\_\_\_\_

Brand/Manufacturer: \_\_\_\_\_

**Frequency Band of Operation:**

C – Band:       Ka – Band:       S – Band:   
Ku – Band:       L – Band:       Other Bands: \_\_\_\_\_

Transmit Frequency Range of Operation: From \_\_\_\_\_ To: \_\_\_\_\_ MHz

Transmit (Tx) Center Frequency: \_\_\_\_\_ MHz

Receive Frequency Range of Operation: From \_\_\_\_\_ To: \_\_\_\_\_ MHz

Receive (Rx) Center Frequency: \_\_\_\_\_ MHz

**Satellite Antenna Parameters:**

Downlink EIRP: \_\_\_\_\_ dBW

Maximum Tx Antenna Gain: \_\_\_\_\_ dBi

Maximum Rx Antenna Gain: \_\_\_\_\_ dBi

Steerable Antenna:    YES                       NO

**Satellite Signal Parameters:**

Polarization Type: \_\_\_\_\_

Bandwidth: \_\_\_\_\_ MHz

Transponder Traffic Loading: \_\_\_\_\_ MHz

Satellite Transmit Power: \_\_\_\_\_ dBW

Receive Power level Contour: \_\_\_\_\_ dBW

PFD at Earth's Surface: \_\_\_\_\_ dBW/m<sup>2</sup>

Multiple Access/Modulation Type: \_\_\_\_\_

Satellite Foot Print: \_\_\_\_\_

**Associated Gateway Earth Station:**

Gateway Earth Station (GES) Site Name/ID (servicing Nigeria): \_\_\_\_\_

Network Operating Center (If different from GES Name/ID above): \_\_\_\_\_

Site Address: \_\_\_\_\_

Town/ City: \_\_\_\_\_ Country: \_\_\_\_\_

Latitude: Deg: \_\_\_\_\_ Mins: \_\_\_\_\_ Secs: \_\_\_\_\_ N  S  In Decimal: \_\_\_\_\_

Longitude: Deg: \_\_\_\_\_ Mins: \_\_\_\_\_ Secs: \_\_\_\_\_ N  S  In Decimal: \_\_\_\_\_

Site Elevation, Above Sea level (ASL): \_\_\_\_\_ Meters

### Other Information

ITU Coordination fillings for Satellite: YES  NO:  (If YES, provide evidence/URL with application form).

Name of Satellite Network as registered in the BRIFIC: \_\_\_\_\_

Name of Satellite beam as registered in the BRIFIC: \_\_\_\_\_

Name of Satellite Home Administration: \_\_\_\_\_

### Disclaimer and Signature

*I certify that the provided information is true and complete.*

*The grant of an Assignment notwithstanding, I understand that any false or misleading information in my application may result in the Commission withdrawing the said Licence and my forfeiture of whatsoever amount I have paid on account of the Licence.*

*Affix Passport  
Photograph of  
Authorized  
Representative*

*Affix Passport  
Photograph of  
Authorized  
Representative*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# IMPORTANT INFORMATION

This application should be submitted in triplicate (each bounded) along with the following documents:

1. Two (2) passport sized photographs each of Two (2) authorized representatives of the company.
2. A copy of the receipt for processing fee (N 10,000:00) (To be paid via the following URL: <https://www.ncc.gov.ng/licensing-regulation/licensing/licensing-procedures#how-to-make-payments>).