

Schedule I must be submitted for every Fixed Microwave and Microwave Broadcast Auxiliary application (Parts 101 and 74) filed for a purpose of New (NE), Modification (MD), Renew/Modification (RM) and Amendment (AM).

Item 1

If this application is being filed as part of a pack, either simultaneously with the pack or as a late addition to the pack, enter 'Y'. Otherwise enter 'N'.

Note: A pack is a set of applications requesting a system or subsystem of microwave links which are related to the extent that they cannot or must not operate independently and so must all have the same grant date and construction deadline. All applications intended to be part of a pack should be filed together with the other applications in the pack, on the same day (the initial filing date of the pack). Applications that are part of a pack may also be filed singly, as a late addition to the pack.

In order to incorporate new paper-filed applications into a new pack, all the paper-filed applications for the new pack must be filed together on the same day; it is recommended that they also be filed in the same envelope.

[RETURN TO FORM](#)

Item 2

Complete this item only if the answer to Item 1 is 'Y'. If this application is being filed on the initial filing date of the pack and the Pack Registration Number has already been obtained on-line, or this application is being filed as a late addition to the pack, the Pack Registration Number must be entered in Item 2a. Otherwise, (*i.e.*, if this application is being filed on the initial filing date of the pack and the Pack Registration Number has not been obtained on-line), enter in Item 2b a descriptive and unique pack name, not exceeding 50 characters, which the FCC will use to relate this application to other applications filed for the pack on the same day. The FCC will assign a new Pack Registration Number to the pack.

Note: It is recommended that a Pack Registration Number be obtained on-line prior to the initial filing of the pack, and entered in Item 2a, to facilitate pack identification and aggregation, and to avoid confusion.

[**RETURN TO FORM**](#)

Item 3

Enter the type of operation code. Select only one code per application. A separate license is needed for each type of operation. Valid types of operation codes are:

F - Permanent Fixed Point to Point

M - Multiple Address System (MAS)

T - Temporary Fixed/Mobile

D - Digital Electronic Message Service (DEMS)

18 - 18 GHz Low Power (*See Section 101.147(r)(10) for definition of Low Power (EIRP less than 1watt)*)

31 - 31 GHz Systems

38 - 38 GHz Systems

[**RETURN TO FORM**](#)

Item 4

Enter the station class code that identifies the transmitter class. Refer to Table 1, located on page 16 of these instructions. The station class codes are as follows:

| | |
|-------------------------------|-----|
| Fixed | FXO |
| Temporary Fixed | FX5 |
| Mobile..... | MO |
| Mobile & Temporary Fixed..... | MO5 |

[RETURN TO FORM](#)

Item 5

For Digital Electronic Message Services (DEMS) only: Enter the Standard Metropolitan Statistical Area (SMSA) for the license.

[RETURN TO FORM](#)

Item 6

This question must be answered if filing an application for a NEW station, a Modification, a Renewal/Modification, or an Amendment to a pending application. Enter 'Y' if you are filing:

- a. An application for a New Station authorization;
- b. An application for a Major Modification of an existing authorization;
- c. An application for a Renewal and Major Modification of an existing authorization;
- d. An application for Major Amendment of any of the above;
- e. An application for Minor Modification or Minor Amendment when this application, along with all other minor Modification or amendment requests filed since you applied for a new authorization, or since the last Major action was granted by the Commission, produces a cumulative effect that would equal or exceed the criteria for a Major filing.

Otherwise, enter 'N' if the cumulative effect would be considered a Minor filing.

See Rule Section 1.929 for specific details on Classification of filings as Major or Minor. For your convenience, you will find Rule Section 1.929 listed on Pages 12 and 13 of the FCC Form 601 Main Form Instructions.

[**RETURN TO FORM**](#)

Item 7

Enter 'Y' if frequency coordination has been completed for this application. Otherwise enter 'N'.

[**RETURN TO FORM**](#)

Frequency Coordinator Information

This section must be completed if the station is not self-coordinated.

Item 8 Enter the frequency coordination number issued by the frequency coordinator for this application.

Item 9 Enter the name of the frequency coordinator.

Item 10 Enter the telephone number (including area code) of the frequency coordinator.

Item 11 Enter the month, day and year on which frequency coordination was completed.

[RETURN TO FORM](#)

Broadcast Auxiliary Only

This item applies to Microwave Broadcast Auxiliary Stations only. Complete either Item 12 or Item 13.

If there is an associated Broadcast Parent station, all parts of Item 12 must be completed. If there is more than one Parent station, select one for the purpose of filing this application. Actions taken on the Broadcast Parent station entered in Item 12 will similarly affect the Broadcast Auxiliary Station (i.e., renewal, assignment of authorization, cancellation, etc.).

Item 12a If there is an associated Broadcast Parent station, enter the **Facility Identification Number**. This is typically a 5 digit number assigned by the FCC's Media Bureau. This is **not** the Call Sign of the Parent station.

Item 12b Enter the Radio Service Code of the Broadcast Parent station. The type of traffic, TV or Aural, indicated by the Radio Service of the Parent station must be consistent with that indicated by the Radio Service Code of the Broadcast Auxiliary station requested under this application:

If filing for Broadcast Auxiliary Radio Service Code of TB, TI, TS, TT, or TP, the Parent station Radio Service Code must be TV or TX.

If filing for a Broadcast Auxiliary Radio Service Code of AB, AI, or AS, the Parent station Radio Service Code must be AM, FM or FX.

Item 12c Enter the City and State of the Parent station's principal community.

Item 13 If there is no associated Parent station, certify that the applicant is a Broadcast Network Entity and enter the State of primary operation. By signing the FCC 601 Main Form filed in conjunction with this Schedule, the applicant certifies that the statement listed in Item 13 is true, complete, correct, and made in good faith. Note that a Broadcast Network Entity must have entered TV Pick-up, radio service code 'TP', in Item 1 of the FCC 601 Main Form.

[RETURN TO FORM](#)

Control Point (Technical Point of Contact)

Fixed Microwave and Microwave Broadcast Auxiliary Services authorize only one control point per license. Therefore, this section must be completed only when a control point is to be added or modified. If you are adding a new control point (for a new license only), complete all items in this section. If you are modifying an existing control point, in addition to Item 14, complete only the items that have changed for the control point. The control point that is currently licensed under this call sign by the FCC will continue to be shown on the Authorization as is, unless a specific action is requested in this section.

Item 14 This item indicates the action the filer wants the FCC to take on the specified control point. Enter 'A' for Add or 'M' for Modify.

Item 15 Enter the street address, city or town, county/borough/parish, and state of the control point. Refer to FCC 601 Main Form Instructions, Appendix II, for a list of valid state, jurisdiction, and area abbreviations.

Item 16 Enter the telephone number, including area code, where a person responsible for operation of the station or system can be reached.

[RETURN TO FORM](#)