

## ITC-214 Form

FCC [[#]]  
ITC-214

### Application for International Section 214 Authorization

Not Yet Approved by OMB  
3060-0686  
Estimated time per response: 9-130  
Edition Date: [XXXX 2024]

[\[link to instructions\]](#)

#### Applicant Information

##### 1. Applicant Information:

- FRN [\[text box\]](#)
- Applicant/Licensee Legal Entity Type (Select One)
  - Individual: [\(check box\)](#)
  - Unincorporated Association: [\(check box\)](#)
  - Government Entity: [\(check box\)](#)
  - Corporation: [\(check box\)](#)
  - Limited Liability Company: [\(check box\)](#)
  - General Partnership: [\(check box\)](#)
  - Limited Partnership: [\(check box\)](#)
  - Limited Liability Partnership: [\(check box\)](#)
  - Other: [\(check box and fill-in box\)](#)
- Name and title; Doing Business As (DBA), address; phone; fax; email; attention to [\(imported from CORES during authentication\)](#).

##### 2. Contact Information

- **Check here if same as Applicant:** [\(check box\)](#)
- **(If different from the Applicant):** Name and title; Doing Business As (DBA), company name; relationship, address; phone; fax; email [\(individual fields editable\)](#)

**3. Additional Contacts.** The Applicant must designate a point of contact who is located in the United States and is a U.S. citizen or lawful U.S. permanent resident, for the execution of lawful requests and as an agent for legal service of process. See 47 CFR § 63.18(q)(1)(iii).

**3.a. Contact for execution of lawful requests.**

Individual Name: [text box]

Company: [text box] [if different than applicant]

Telephone number: [text box]

Fax number: [text box]

Email: [text box]

Complete business address: [text box]

Alternate contact for execution of lawful requests (optional)

(check box) Select if alternate contact has been designated.

[If check box is selected, enter alternate contact information in the following text boxes]

Alternate Individual Name: [text box]

Alternate Company: [text box] [if different than applicant]

Alternate Telephone number: [text box]

Alternate Fax number: [text box]

Alternate Email: [text box]

Alternate Complete business address: [text box]

**3.b. Agent for legal service of process**

(check box) Select if agent is same as contact for execution of lawful requests.

[If check box is selected, enter information in the following text boxes]

Individual Name: [text box]

Company: [text box] [if different than applicant]

Telephone number: [text box]

Fax number: [text box]

Email: [text box]

Complete business address: [text box]

Alternate contact for execution of lawful requests (optional)

(check box) Select if alternate contact has been designated.

[If check box is selected, enter contact information in the following text boxes]

Alternate Individual Name: [text box]

Alternate Company: [text box] [if different than applicant]

Alternate Telephone number: [text box]

Alternate Fax number: [text box]

Alternate Email: [text box]

Alternate Complete business address: [text box]

**4. Identify the Government, State, or Territory under the laws of which a corporate or partnership Applicant is organized.**

[Drop-down menu with list of countries and states and territories, if United States is selected with ability to add/remove additional entries]

(a) Applicant Name	(b) Government, State, or Territory where Applicant is Organized	(b)(1) Other Country [available for filling in only when the selection in column (b) is "other unspecified area"]
		[text box]

**Application Information**

**5. Brief Application Description: (editable field)**

**6. Service Type(s): (check all that apply)**

- **6.a. Global Facilities-Based Authority pursuant to section 63.18(e)(1) of the Commission’s rules (i.e., to all permissible international points). [check box]**
- **6.b. Limited Facilities-Based Authority pursuant to section 63.18(e)(1)(ii) of the Commission’s rules. [check box] [If selected, identify the countries for which the Applicant does not request authorization in drop down box]**
- **6.c. Global Resale Authority pursuant to section 63.18(e)(2) of the Commission’s rules i.e., to all permissible international points). [check box]**
- **6.d. Limited Resale Authority pursuant to section 63.18(e)(2)(ii) of the Commission’s rules. [check box] [If selected, identify the countries for which the Applicant does not request authorization in drop down box]**
- **6.e. Other Authorizations pursuant to section 63.18(e)(3) of the Commission’s rules. [Check Box] [If an Applicant selects any of the options under 6.e. (63.18(e)(3))] If the Applicant seeks “Other Authorization” to acquire facilities or to provide services under 63.18(e)(3), select one or more of the choices below and provide in an attachment a complete description of the request and the information required by section 63.18 of the Commission’s rules.**
  - **6.e.1. Facilities-Based Service to a single destination country (check box)**
  - **6.e.2. Resale Service to a single destination country (check box)**

- o 6.e.3. Overseas Cable Construction (for common carrier submarine cables) (check box)
- o 6.e.4. Other Requests [Fill-in text box]
- o [If 6.e.2. is checked, the following statement appears: Provide the “Lead” Applicant Ownership and Foreign Carrier Affiliation information in this form and for each additional Applicant, use the “Additional Applicants/ITC-214-Supplement A” for additional Applicant information. [Applicant can complete multiple “Additional Applicants/ITC-214-Supplement A.”]

6.f. [Appears only if 6.e.3 is selected] Are there additional Applicants for an Overseas Cable Construction 214 Authorization?

- o 6.f.1. Single Applicant (a check box)  
[If checked, proceed to Q7]
- o 6.f.2 Multiple Applicants (Consortium) (a check box)  
[If 6.f.2 is selected, questions 6.f.2.a. and 6.f.2.b. appear]
  - o 6.f.2.a. How many Applicants are seeking to become holders of this Overseas Cable Construction Authorization?  
  
[fill in box]
  - o 6.f.2.b. Who are the additional Applicant(s) for this Overseas Cable Construction Authorization?  
  
[fill in box]  
[Fill in FRN]
- o [If 6.f.2. is checked] Provide the “Lead” Applicant Ownership and Foreign Carrier Affiliation information in this form and for each additional Applicant, use the “Additional Applicants/ITC-214-Supplement A” for additional Applicant information. [Applicant can fill in, save, and attach multiple “Additional Applicants/ITC-214-Supplement A” for at least as many as the number of Applicants provided in response to 6.f.2.a.]

[If 6a, 6b, 6.e.1, 6.e.3 or 6.e.4 is selected, this question appears] 6.g Are the facilities to be used by the Applicant to provide facilities-based international service categorically excluded from environmental processing as defined by section 1.1306 of the Commission’s rules?

- o Yes (check box)

- **No (check box) [If "No" is checked]** In an attachment, provide an environmental assessment as described in section 1.1311 of the Commission's rules.

**7. Is the Applicant(s) requesting streamlined processing?**

- **Yes (check box) [If Yes]** Applicant must submit an attachment that includes a statement of how the application qualifies for streamlined processing under section 63.12 of the Commission's rules.
- **No (check box)**

**8. Has the Commission granted the Applicant an international section 214 authorization previously?**

- **Yes (check box) [If Yes]** In the table below, provide the AuthID/file numbers held by the Applicant.  
[fill in table to input AuthID(s)/ITC-214, ITC-MOD file numbers]]
- **No (check box)**


**Related Filings**

**9. Is there a separately related application filed by the Applicant?**

- **Yes (check box) [if Yes]**  
Enter below the ICFS File No(s), ULS File No(s), and Docket No(s) for the related filings.  
ICFS: [fill-in box]  
ULS: [fill-in box]  
Docket: [fill-in box]  
[these fill in box fields allow for addition/removal of multiple ICFS File Nos., ULS File No(s), and Docket No(s).]
- **No (check box)**

**Foreign Ownership**

**10. Does any individual or entity that is not a U.S. citizen hold a 10% or greater direct or indirect equity or voting interest, or a controlling interest, in the Applicant(s)?**

- Yes (check box) [if checked, Q11 appears.]
- No (check box)

**10.a. Does this application qualify for exclusion from referral to the Executive Branch because (1) the only reportable foreign ownership is through wholly owned intermediate holding companies and the ultimate ownership and control is held by U.S. citizens or entities; (2) the Applicant has an existing international section 214 authorization that is conditioned on compliance with an agreement with an Executive Branch agency concerning national security and/or law enforcement, there are no new reportable foreign owners of the Applicant since the effective date of the agreement, and the Applicant agrees to continue to comply with the terms of that agreement; and/or (3) the Applicant was reviewed by the Executive Branch within 18 months of the filing of the application and the Executive Branch had not previously requested that the Commission condition the Applicant's international section 214 authorization on compliance with an agreement with an Executive Branch agency concerning national security and/or law enforcement and there are no new reportable foreign owners of the Applicant since that review?**

- Yes (check box) [If Yes, the following statement appears] The Applicant must make and attach a specific showing in its application that it qualifies for the exclusion(s), as provided in 47 CFR § 1.40001(a)(2).
- No (check box) [If No, then 10.b appears and a check box below 10.b with the following statement] The Applicant acknowledges these requirements.

**10.b. The Applicant for which an individual or entity that is not a U.S. citizen holds a 10% or greater direct or indirect equity or voting interest, or a controlling interest, in the Applicant, shall submit:**

- Responses to standard questions, prior to or at the same time the Applicant files its application with the Commission, pursuant to part 1, subpart CC, of the Commission's rules, to the Committee for the Assessment of Foreign Participation in the United States Telecommunications Services Sector (Committee). The required information shall be submitted separately from the application and shall be submitted directly to the Committee.

- A complete and unredacted copy of its FCC application(s), including the file number(s) and docket number(s), to the Committee within three (3) business days of filing it with the Commission.

[check box]

**Applicant Ownership Information**

**11. Does any person or entity directly or indirectly have 10% or more of the equity interests and/or voting interests, or a controlling interest, of the Applicant?**

- **Yes** (check box) Provide, in the fields below, the name, address, citizenship, and principal business of any person or entity that directly or indirectly owns at least 10% of the equity and/or voting interest or a controlling interest of the Applicant (“interest holder”) and the percentage of equity and/or voting interests owned by each of those entities to the nearest 1%. Also provide, in an attachment, a detailed ownership listing responding to section 63.18(h) of the Commission's rules.

(a) Name of Individual or Entity that Directly or Indirectly Owns 10% or More of the Equity and/or Voting Interests of Applicant or Has a Controlling Interest (“Interest Holder”)	(b) Address of Interest Holder	(c) Citizenship or Country of Incorporation of Interest Holder	(c)(1) Dual or More Citizenships (if applicable)	(d) Principal Business of Interest Holder	(e) Name of the Entity in Which the Interest Holder has a Direct 10% or More Equity and/or Voting Interest	(f) Equity Interest Held by Interest Holder (%)	(g) Voting Interest Held by Interest Holder (%)
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Fill-in box	Fill-in box	Drop-down menu of countries.	<p>[Optional column.]</p> <p>Applicant can choose one or more countries from Drop-down country list. Applicant can select "other non-specified areas." The "other non-specified areas" must be named in an uploaded attachment.]</p>	[Fill-in box]	[Fill-in box]	<p>[Fill-in box]</p> <p>[cannot be less than 0 or greater than 100]</p>	<p>[Fill-in box]</p> <p>[cannot be less than 0 or greater than 100]</p>
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[Ability to add/remove rows]

- No [Check Box]

**12. Does the Applicant have any interlocking directorates with a foreign carrier, pursuant to section 63.18(h) of the Commission’s rules?**

- Yes [check box] In an attachment identify the interlocking directorates pursuant to 63.18(h) of the Commission’s rules.
- No [check box]

**Foreign Carrier Affiliations**

**13. Is the Applicant a foreign carrier or affiliated with a foreign carrier as defined in sections 63.09(d) and (e) of the Commission’s rules?**

- Yes **[check box]** Complete the table below and, in an attachment, provide the information and certifications required by section 63.18(i) through (m) of the Commission’s rules.
- No **[check box]** In an attachment, provide the information and certifications required by 47 CFR § 63.18(i) through (m).

**13.a. [If the answer to Q 13 is Yes, the following table and text appear]**

**Provide the affiliation information below:**

For column (c)1, choose from one of the following options: (a) The Applicant is a foreign carrier in that country; (b) The Applicant controls a foreign carrier in that country; (c) Any entity that owns more than 25% of the Applicant, or that controls the Applicant, controls a foreign carrier in that country; (d) Two or more foreign carriers (or parties that control foreign carriers) own, in the aggregate, more than 25 percent of the Applicant and are parties to, or the beneficiaries of, a contractual relation (e.g., a joint venture or market alliance) affecting the provision or marketing of international basic telecommunications services in the United States; or (e) the country is a member of the World Trade Organization.

(a) Name of Foreign Carrier	(b) Country of Affiliation	(c)(1) Identify the Type of Affiliation	(c)(2) Explanation for Non-standard Affiliation	(d) Does the Applicant seek to provide international telecommunications service to this country?	(e) Is this country a member of the World Trade Organization ?
<b>[Fill-in box]</b>	<b>[Drop-down menu of countries]</b>  <b>[Applicant can select "other non-</b>	<b>[Text box with these options]:</b> • (a) The Applicant is a foreign carrier in that country; or •(b) The Applicant controls a foreign	<b>[Fill-in box if "e" was selected in column (c) (1)]</b>	<b>[Yes/No radial buttons]</b>	<b>[Yes/No radial buttons]</b>

	<p>specified areas” and must provide those areas in an uploaded attachment. ]</p>	<p>carrier in that country; or</p> <ul style="list-style-type: none"> <li>•(c) Any entity that owns more than 25% of the Applicant, or that controls the Applicant, controls a foreign carrier in that country.</li> <li>• (d) Two or more foreign carriers (or parties that control foreign carriers) own, in the aggregate, more than 25 percent of the Applicant and are parties to, or the beneficiaries of, a contractual relation (e.g., a joint venture or market alliance) affecting the provision or marketing of international basic telecommunications services in the United States.</li> <li>•(e) N/A [text box for explanation if needed.]</li> </ul>			
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[Applicant has the ability to add/remove rows]

**13.b. [If answer to Q13 is Yes]** Does the Applicant seek to be classified as non-dominant on any route listed in the application pursuant to section 63.10 of the Commission's rules?

- Yes **[Check Box]** **[If Yes, show Qs 13c and 13d and statement]** "The Applicant must provide in an attachment information to demonstrate that it qualifies for non-dominant classification under section 63.10 of the Commission's rules."
  - No **[Check Box]** **[If No, show Q13e]**
- **13.c. [If the answer to Q 3.b. is Yes]** Identify the routes for which the Applicant is requesting to be classified as a "non-dominant" carrier.  
[Drop-down menu of countries. Can check multiple entries.]
  - **13.d. [If the answer to Q13.b is Yes]** Has the Applicant uploaded an attachment providing information to demonstrate that it qualifies for non-dominant classification under section 63.10 of the Commission's rules?
    - Yes (check box)
    - No (check box)
  - **13.e [If the answer to Q13.b, is No,]** The Applicant agrees to the requirements of section 63.10(c), (d) & (e) for the following routes:  
[Drop-down menu of countries with ability to select multiple entries.]

### Waivers

**14. Does the Applicant request a waiver(s) of the Commission's rules?**

- Yes (check box) If yes, attach the request with a supporting narrative and documentation.
- No (check box)

**14a. If yes, Identify the rule section(s) for which a waiver is sought below.**

[fill-in box]

### Application Fees

**15. Will a fee be paid?**

- Yes (check box)

- No (check box)

15.a. If yes, select the appropriate fee code for the application.

[[Down box to select fee code]]

15.b If no, indicate reason for fee exemption.

- Governmental Entity (check box)
- Noncommercial educational license (check box)
- Other (Explain) [Fill-in text box for explanation]]

### Attachments

**16.** If the Applicant seeks “Other Authorization” to acquire facilities or to provide services under section 63.18(e)(3), the Applicant has uploaded a complete description of the request and the information required by section 63.18 of the Commission’s rules.

- Yes (check box)
- N/A (check box)

**17.** The Applicant has uploaded an attachment that includes a statement of how the application qualifies for streamlined processing under section 63.12 of the Commission’s rules.

- Yes (check box)
- N/A (check box)

**18.** The Applicant has provided an environmental assessment as described in section 1.1311 of the Commission’s rules.

- Yes (check box)
- N/A (check box)

**19.** The Applicant has uploaded an attachment to provide a detailed ownership listing and ownership diagram responding to section 63.18(h) of the Commission's rules.

- Yes (check box)
- N/A (check box)

20. The Applicant has uploaded an attachment identifying any interlocking directorates with a foreign carrier, pursuant to section 63.18(h) of the Commission's rules.
- Yes (check box)
  - N/A (check box)
21. The Applicant has uploaded an attachment providing the information and certifications required by section 63.18(i) through (m) of the Commission's rules.
- Yes (check box)
  - N/A (check box)
22. The Applicant has uploaded an attachment providing information to demonstrate that it qualifies for non-dominant classification under section 63.10 of the Commission's rules.
- Yes (check box)
  - N/A (check box)
23. The Applicant has uploaded a statement supporting the waiver request and identifying the rule number(s) involved, along with other material information.
- Yes (check box)
  - N/A (check box)
24. The Applicant has uploaded a statement showing that its application qualifies for exclusion from referral to the Executive Branch under section 1.40001(a)(2) of the Commission's rules.
- Yes (check box)
  - N/A (check box)

#### Confidential Treatment of Attachments

25. Is the Applicant requesting confidential treatment of an attachment(s) under section 0.459 of the Commission's rules?
- Yes (check box)
  - No (check box)

The Applicant must upload a supporting statement for the "confidential treatment request(s)" identifying the applicable rule(s) and providing other supporting materials or information. The Applicant must also upload both the Redacted Public version and the Non-Redacted Confidential version of the attachment(s) in the Attachments section below.

Attachment No.	Description of Attachment	Confidential Treatment Requested
Attachment 1	[Fill-in box]	[check box]
Attachment 2 (Public Version of Confidential Treatment Request and Supporting Statement)	[Fill-in box]	
Attachment 2(a) (Public Redacted Version)	[Fill-in box]	
Attachment 2(b) (Confidential Non-Redacted Version)	[Fill-in box]	

**Certification Statements and Acknowledgements**

**26. In submitting this form,**

- The Applicant certifies that for any country in which the Applicant is affiliated with a foreign carrier as defined in section 63.09(d) and (e) of the Commission’s rules that is not a member of the World Trade Organization, it has demonstrated in an attachment whether the foreign carrier has market power or lacks market power under the criteria in section 63.10(a) of the Commission’s rules.
- If applying for facilities-based authority, the Applicant certifies that it will comply with the terms and conditions contained in sections 63.21 and 63.22 of the Commission’s rules.

- If applying for resale-based authority, the Applicant certifies that it will comply with the terms and conditions contained in sections 63.21 and 63.23 of the Commission's rules.
- The Applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.
- The Applicant certifies that it has provided all the required information and certifications under section 63.18 of the Commission's rules.
- The Applicant certifies that neither it nor any other party to the application is subject to a denial of Federal benefits, including FCC benefits pursuant to section 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. *See* 47 CFR § 1.2002(b) for the meaning of "party to the application" for these purposes. (This certification does not apply to applications filed in services exempted under § 1.2002(c) of the rules, or to Federal, State or local governmental entities or subdivisions thereof. *See* 47 CFR § 1.2002(c).)
- The Applicant(s) certifies that all of its statements made in this Application (including any Supplement(s)) and in the attachments or documents incorporated by reference are material, are part of this Application, and are true, complete, correct, and made in good faith.

(check box)

**National Security/Law Enforcement Certification Statements**

**27. In submitting this form, the Applicant certifies that it will:**

- Comply with all applicable Communications Assistance for Law Enforcement Act (CALEA) requirements and related rules and regulations, including any and all FCC orders and opinions governing the application of CALEA, pursuant to the Communications Assistance for Law Enforcement Act and the Commission's rules and regulations in Title 47, part 1, subpart Z;

- Make communications to, from, or within the United States, as well as records thereof, available in a form and location that permits them to be subject to a valid and lawful request or legal process in accordance with U.S. law, including but not limited to:
  - The Wiretap Act, 18 U.S.C. § 2510 et seq.;
  - The Stored Communications Act, 18 U.S.C. § 2701 et seq.;
  - The Pen Register and Trap and Trace Statute, 18 U.S.C. § 3121 et seq.; and
  - Other court orders, subpoenas or other legal process;
- Designate a point of contact who is located in the United States and is a U.S. citizen or lawful U.S. permanent resident, for the execution of lawful requests and as an agent for legal service of process;
- Ensure the continuing accuracy and completeness of all information submitted, whether at the time of submission of the application or subsequently in response to either the Commission or the Committee's request, as required under section 1.65(a) of the Commission's rules, and to inform the Commission and the Committee of any substantial and significant changes while an application is pending;
- Ensure that after the application is no longer pending for purposes of section 1.65 of the Commission's rules, it will notify the Commission and the Committee of any changes in the authorization holder or licensee information and/or contact information promptly, and in any event within thirty (30) days; and
- Fulfill the conditions and obligations set forth in the certifications set out in section 63.18(q) of the Commission's rules or in the grant of an application or authorization and/or that if the information provided to the United States Government is materially false, fictitious, or fraudulent, it may be subject to all remedies available to the United States Government, including but not limited to revocation and/or termination of the Commission's authorization or license, and criminal and civil penalties, including penalties under 18 U.S.C. § 1001.

(check box)

**28. Party Authorized to Sign:**

<b>First Name:</b>	<b>MI:</b>	<b>Last Name:</b>	<b>Suffix:</b>
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<b>Title:</b>			
<b>Signature:</b>		<b>Date:</b>	
<b>FAILURE TO SIGN THIS FORM MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b>			
<b>WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPSONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503)</b>			

**[Show only if 6.e.2./Multiple Applicants is selected]**

**Additional Applicants/ITC-214-Supplement A  
(Provide the Requested Additional Information for Each  
Applicant Covered by the Application Separately)**

**1. Additional Applicant Information:**

- FRN **[text box]**
- Applicant/Licensee Legal Entity Type (Select One)
  - Individual: **(check box)**
  - Unincorporated Association: **(check box)**
  - Government Entity: **(check box)**
  - Corporation: **(check box)**
  - Limited Liability Company: **(check box)**
  - General Partnership : **(check box)**
  - Limited Partnership: **(check box)**
  - Limited Liability Partnership: (a check box)
  - Other: **(check box and fill-in box)**
- Name and title; Doing Business As (DBA), address; phone; fax; email; attention to **(imported from CORES during authentication)**

**2. Contact Information**

- **Check here if same as Licensee:** **(check box)**
- **(If different from the Applicant):** Name and title; Doing Business As (DBA), company name; relationship, address; phone; fax; email; **(individual fields should be editable)**

**29. Additional Contacts.** The Applicant must designate a point of contact who is located in the United States and is a U.S. citizen or lawful U.S. permanent resident, for the execution of lawful requests and as an agent for legal service of process. See 47 CFR § 63.18(q)(1)(iii).

**3.a. Contact for execution of lawful requests.**

Individual Name: [text box]  
Company: [text box] [if different than applicant]  
Telephone number: [text box]  
Fax number: [text box]  
Email: [text box]  
Complete business address: [text box]

Alternate contact for execution of lawful requests (optional)  
(check box) Select if alternate contact has been designated.  
[If check box is selected, enter alternate contact information in the following text boxes]

Alternate Individual Name: [text box]  
Alternate Company: [text box] [if different than applicant]  
Alternate Telephone number: [text box]  
Alternate Fax number: [text box]  
Alternate Email: [text box]  
Alternate Complete business address: [text box]

### **3.b. Agent for legal service of process**

(check box) Select if agent is same as contact for execution of lawful requests.  
[If check box is selected, enter information in the following text boxes]

Individual Name: [text box]  
Company: [text box] [if different than applicant]  
Telephone number: [text box]  
Fax number: [text box]  
Email: [text box]  
Complete business address: [text box]

Alternate contact for execution of lawful requests (optional)  
(check box) Select if alternate contact has been designated.  
[If check box is selected, enter contact information in the following text boxes]

Alternate Individual Name: [text box]  
Alternate Company: [text box] [if different than applicant]  
Alternate Telephone number: [text box]  
Alternate Fax number: [text box]  
Alternate Email: [text box]  
Alternate Complete business address: [text box]

3. Identify the Government, State, or Territory under the laws of which a corporate or partnership the Applicant is organized.
4. [Drop-down menu with list of countries and states and territories (if United States is selected)] [Ability to add/remove additional entries]

(a) Applicant Name	(b) Government, State, or Territory where Applicant is Organized

**Ownership Information**

5. Does any person or entity directly or indirectly hold 10% or more of the equity interests and/or voting interests, or a controlling interest, of the Applicant?
  - Yes [Check Box] [[If yes, the following text and table appear]

Provide, in the fields below, the name, address, citizenship, and principal business of any person or entity that directly or indirectly holds at least 10% of the equity and/or voting interests or a controlling interest of the Applicant (“interest holder”) and the percentage of equity and/or voting interests owned by each of those entities to the nearest 1%. Also provide, in an attachment, a detailed ownership listing and ownership diagram responding to section 63.18(h) of the Commission's rules.

(a) Name of Individual or Entity that Directly or	(b) Address of Interest Holder	(c) Citizenship or Country of Incorporation of Interest Holder	(c)(1) Dual or More Citizenships (if applicable)	(d) Principal Business of Interest Holder	(e) Name of the Entity in Which the Interest	(f) Equity Interest Held by Interest Holder	(g) Voting Interest Held by Interest Holder (%)

Indirectly Owns 10% or More of the Equity and/or Voting Interests of Applicant or Has a Controlling Interest (“Interest Holder”)					Holder has a Direct 10% or More Equity and/or Voting Interest	( (%)	
[Fill-in box]	[Fill-in box]	[Drop-down menu of countries]	[Optional column]  [Applicant can select “other non-specified areas” and must provide those areas in an uploaded attachment.]	[Fill-in box]	[Fill-in box]	[Fill-in box]	[Fill-in box]

[Ability to add/remove rows]

- No [Check Box]

6. Does the Applicant have any interlocking directorates with a foreign carrier, pursuant to section 63.18(h) of the Commission’s rules? [[add link to rule [47 CFR § 63.18\(h\)](#)]]

- Yes **[check box]** **[If yes, show the following statement]** In an attachment provide a list of the interlocking directorates.
- No **[check box]**

**Foreign Carrier Affiliations**

7. Is the Applicant a foreign carrier or affiliated with a foreign carrier as defined in section 63.09(d) and (e) of the Commission's rules?

- Yes **[check box]** **[If yes, the table and text below appear]** Complete the table below and, in an attachment, provide the information and certifications required by section 63.18(i) through (m) of the Commission's rules.
- No **[check box]** **[If no, the following text appears]** In an attachment, provide the information and certifications required by 47 CFR § 63.18(i) through (m).

8.a. **[Show this table if Q8 is Yes]** Provide the affiliation information below:

(a) Name of Foreign Carrier	(b) Country or Countries of Affiliation	(c) DRAFT -- Identify the Type of Affiliation	(d) March 2022 Does the Applicant seek to provide international telecommunications service to this country?	(e) Is this country a member of the World Trade Organization?
[Fill-in box]	[Drop-down menu of countries]	<p>[[Text box with these options]]:</p> <ul style="list-style-type: none"> <li>• (a) The Applicant is a foreign carrier in that country; or</li> <li>• (b) The Applicant controls a foreign carrier in that country; or</li> <li>• (c) Any entity that owns more than 25% of the Applicant, or that controls the Applicant, controls a foreign carrier in that country.</li> <li>• (d) Two or more foreign carriers (or parties that control foreign carriers) own, in the aggregate, more than 25 percent of the Applicant and are parties to, or the beneficiaries of, a contractual relation (e.g., a joint venture or market alliance) affecting the provision or marketing of international basic telecommunications services in the United States.</li> <li>• (e) N/A [text box]</li> </ul>	[Yes/No radial buttons]	[Yes/No radial buttons]

[Ability to add/remove rows from this table]

**8b. [If the answer to Q8 is Yes, the following text appears]** Does the Applicant seek to be classified as non-dominant on any route listed in the application pursuant to section 63.10 of the Commission's rules?

- Yes [check box] [If Yes, show [Qs 8c. and 8d.] The Applicant must provide in an attachment information to demonstrate that it qualifies for non-dominant classification under section 63.10 of the Commission's rules.
- No [check box] [if No show Q8e].

**8c. [If Q 8b is Yes]** Identify the routes for which the Applicant is requesting to be classified as a "non-dominant" carrier.

[Drop-down menu of countries with ability of select multiple entries.]

**8d. [If Q 8b, is Yes]** Has the Applicant uploaded an attachment providing information to demonstrate that it qualifies for non-dominant classification under section 63.10 of the Commission's rules?

- Yes (check box)
- No (check box)

**8e. [If Q 8b, is No]** The Applicant agrees to the requirements of section 63.10(c), (d) & (e) for the following routes:

[Drop-down menu of countries with ability of select multiple entries.]

## Waivers

**8. Does the Applicant request a waiver(s) of the Commission's rules?**

- Yes (check box) If yes, attach the request with a supporting narrative and documentation.
- No (check box)

**9a. If yes, Identify the rule section(s) for which a waiver is sought below.**

[fill-in box]

## Attachments

- 9. The Applicant has uploaded an attachment to provide a detailed ownership listing and ownership diagram responding to section 63.18(h).**
- Yes (check box)
  - N/A (check box)
- 10. The Applicant has uploaded an attachment identifying any interlocking directorates with a foreign carrier, pursuant to section 63.18(h) of the Commission's rules.**
- Yes (check box)
  - N/A (check box)
- 11. The Applicant has uploaded an attachment providing the information and certifications required by section 63.18(i) through (m) of the Commission's rules.**
- Yes (check box)
  - N/A (check box)
- 12. The Applicant has uploaded an attachment providing information to demonstrate that it qualifies for non-dominant classification under section 63.10 of the Commission's rules.**
- Yes (check box)
  - N/A (check box)
- 13. If the Applicant is requesting a waiver, it has uploaded a statement supporting the waiver request and identifying the rule number(s) involved, along with other material information.**
- Yes (check box)
  - N/A (check box)

**Attachments/Confidential Treatment of Attachments**

**14. Is the Applicant requesting confidential treatment of an attachment(s) under section 0.459 of the Commission’s rules?**

- Yes (check box)
- No (check box)

**[If the answer to Q15 is “Yes,” the following statement appears]** The Applicant must upload a supporting statement for the “confidential treatment request(s)” identifying the applicable rule(s) and providing other supporting materials or information. The Applicant must also upload both the Redacted Public version and the Non-Redacted Confidential version of the attachment(s) in the Attachments section below.

Attachment No.	Description of Attachment	Confidential Treatment Requested
Attachment 1	[Fill-in box]	[check box]
Attachment 2 (Public Version of Confidential Treatment Request and Supporting Statement)	[Fill-in box]	
Attachment 2(a) (Public Redacted Version)	[Fill-in box]	
Attachment 2(b) (Confidential Non-Redacted Version)	[Fill-in box]	[check box]

**Certification Statements and Acknowledgements**

**15. In submitting this form,**

- The Applicant certifies that for any country in which the Applicant is affiliated with a foreign carrier as defined in sections 63.09(d) and (e) of the Commission's rules that is not a member of the World Trade Organization, it has demonstrated in an attachment whether the foreign carrier has market power or lacks market power under the criteria in section 63.10(a) of the Commission's rules.
- The Applicant certifies that it will comply with the terms and conditions contained in sections 63.21 and 63.22 of the Commission's rules.
- The Applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.
- The Applicant certifies that it has provided all the required information and certifications under section 63.18 of the Commission's rules.
- The Applicant certifies that neither it nor any other party to the application is subject to a denial of Federal benefits, including FCC benefits pursuant to section 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. *See* 47 CFR § 1.2002(b) for the meaning of "party to the application" for these purposes." (This certification does not apply to applications filed in services exempted under § 1.2002(c) of the rules, or to Federal, State or local governmental entities or subdivisions thereof. *See* 47 CFR § 1.2002(c).)
- The Applicant certifies that all of its statements made in this Application regarding the authorization (including this Supplement-A) and in the attachments or documents incorporated by reference are material, are part of this Application, and are true, complete, correct, and made in good faith.

[check box]

**National Security/Law Enforcement Certification Statements**

**16. In submitting this form, the Applicant certifies that it will:**

- Comply with all applicable Communications Assistance for Law Enforcement Act (CALEA) requirements and related rules and regulations, including any and all FCC orders and opinions governing the application of CALEA, pursuant to the Communications Assistance for Law Enforcement Act and the Commission's rules and regulations in Title 47, part 1, subpart Z;
- Make communications to, from, or within the United States, as well as records thereof, available in a form and location that permits them to be subject to a valid and lawful request or legal process in accordance with U.S. law, including but not limited to:
  - The Wiretap Act, 18 U.S.C. § 2510 et seq.;
  - The Stored Communications Act, 18 U.S.C. § 2701 et seq.;
  - The Pen Register and Trap and Trace Statute, 18 U.S.C. § 3121 et seq.; and
  - Other court orders, subpoenas or other legal process;
- Designate a point of contact who is located in the United States and is a U.S. citizen or lawful U.S. permanent resident, for the execution of lawful requests and as an agent for legal service of process;
- Ensure the continuing accuracy and completeness of all information submitted, whether at the time of submission of the application or subsequently in response to either the Commission or the Committee's request, as required under section 1.65(a) of the Commission's rules, and to inform the Commission and the Committee of any substantial and significant changes while an application is pending;
- Ensure that after the application is no longer pending for purposes of section 1.65 of the Commission's rules, it will notify the Commission and the Committee of any changes in the authorization holder or licensee information and/or contact information promptly, and in any event within thirty (30) days; and

- Fulfill the conditions and obligations set forth in the certifications set out in section 63.18(q) of the Commission’s rules or in the grant of an application or authorization and/or that if the information provided to the United States Government is materially false, fictitious, or fraudulent, it may be subject to all remedies available to the United States Government, including but not limited to revocation and/or termination of the Commission’s authorization or license, and criminal and civil penalties, including penalties under 18 U.S.C. § 1001.

[check box]

**17. Party Authorized to Sign**

<b>First Name:</b>	<b>MI:</b>	<b>Last Name:</b>	<b>Suffix:</b>
<b>Title:</b>			
<b>Signature:</b>		<b>Date:</b>	
<b>FAILURE TO SIGN THIS FORM MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b>			
<b>WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPSONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312(a), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503)</b>			