FCC ITC-WAV

FEDERAL COMMUNICATIONS COMMISSION

Not Yet Approved by OMB 3060-0686

Instructions for Waiver Application for International 214 Authorization

ITC-WAV

GENERAL INSTRUCTIONS

Purpose of Form

This form is used to request a waiver of the rules regarding international section 214 authorizations. 47 CFR §§ 63.09 et seq.

Who Must File This Form and When

Any party seeking waiver from the rules regarding an international section 214 authorization.

Description of Form

The waiver application forms the basis for the grant of Applicant's request. This form consists of a main form and the ability to file an attachment to support the request. The Applicant is encouraged to upload a single document in machine readable format, including all required information. The Applicant must fill in all required fields, upload required documents, make all required certifications, and sign the form before submitting the application.

Information Current and Complete

Information filed in the application with the Commission must be kept current and complete under section <u>1.65</u> of the Commission's rules. Under Section 63.50 of the Commission's rules, 47 CFR § 63.50, the rule permits the applicant or the party to the application as a matter of right to amend any application prior to the date of any final action taken by the Commission. Pursuant to section 63.50, Applicant(s) must notify the Commission regarding any substantial and significant changes in the information furnished in the application while it remains pending.

To amend a submitted waiver request, use a separate form, ITC-AMD.

Applicable Rules and Regulations

Section 1.3 of the Commission's rules allows parties to request waiver of the rules when good cause is shown.

The provisions of this chapter may be suspended, revoked, amended, or waived for good cause shown, in whole or in part, at any time by the Commission, subject to the provisions of the Administrative Procedure Act and the provisions of this chapter. Any provision of the rules may be waived by the Commission on its own motion or on petition if good cause therefor is shown. 47 CFR § 1.3.

The rules regarding international section 214 authorizations are contained in Part 63 of the Commission's rules. 47 CFR §§ 63.09 et seq.

Other International Section 214 (ITC) Forms

• ITC-214 Form

• This form is used to request authority under section 214 to provide international services.

• ITC-AMD Form

o This form is used to amend a pending application related to an international section 214 authorization.

ITC-ASG&TC Form

o This form is used for an assignment of an international section 214 authorization or the transfer of control of an authorization holder. The form is used for both substantive and pro forma transactions.

• ITC-DSC Form

o This form is used to notify the Commission of an international section 214 authorization holder's intention to discontinue, reduce or impair international service.

ITC-MOD Form

o This form is used to modify an existing international section 214 authorization, for example to add or remove a condition on an existing authorization.

ITC-FCN Form

o The form is used by a licensee to notify the Commission of new foreign carrier affiliations.

ITC-RPT Form

o This form is used to file the reports required for a carrier classified at dominant for the provision of particular services on particular routes due to an affiliation with a foreign carrier with market power in a destination country in accordance with section 63.10(c) of the Commission's rules.

• ITC-STA Form

This form is used to request Special Temporary Authority related to an international section 214 authorization, such as to provide service prior to grant of the authorization or related to an unauthorized transaction related to the authorization.

FCC Notice Required By The Paperwork Reduction Act

We have estimated that on average each response to this collection of information will take 2 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and actually complete and review the form or response. If you have any comments on this burden estimate, or on how we can improve the collection and reduce the burden it causes you, please e-mail them to pra@fcc.gov or send them to the Federal Communications Commission, AMDPERM, Paperwork Reduction Project (3060-0404), Washington, DC 20554. Please DO NOT SEND COMPLETED APPLICATIONS TO THIS ADDRESS.

The Applicant is 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 of if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0404. This notice is required by the Paperwork Reduction Act of 1995, P.L. 104-13, October 1, 1995, 44 U.S.C. Section 3507.

For Assistance

For assistance with completing the forms, contact International Bureau, Telecommunications and Analysis Division at FCC-OIA-TAD@fcc.gov or at (202) 418-1480.

FILING INSTRUCTIONS FOR Waiver Application -NEW FORM

Applicant Information

<u>Item 1</u>. Enter the information requested. Some data will be pre-populated using the data associated with Applicant's FCC Registration Number (FRN).

When the Applicant enters its FRN, the Information will pre-populate with its FRN data in CORES. To modify these pre-populated data, update the data associated with the FRN in CORES. [https://www.fcc.gov/licensing-databases/commission-registration-system-fcc Link to CORES]

Enter any missing data and sections that are not already populated from CORES, such as the "legal entity type" or "Doing Business As (DBA)" name.

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Contact Information

<u>Item 2</u>. Identify the contact representative, if different from the Applicant. The contact information can be imported automatically from CORES if the Applicant supplied an FRN, but fields are still editable.

If the contact representative is the same as the person indicated in Item 1, then check the box "Same as Applicant." If the contact representative is not the same as the Applicant provide the requested information.

- Provide the name of a person in your organization, your outside counsel, or other representative whom we can contact if there are questions regarding your application. This person should have decisional authority over the contents of your application.
- Provide the Company name if different from Applicant name in Item 1 or repeat "Company" name here.
- Provide the contact representative's address, phone number, fax number, and email.
- Provide your "Doing Business As (DBA)" name. If the Applicant is not operating its business using a DBA, you may leave this section blank.
- Indicate how the contact person is related to the Applicant. For example, indicate that the "contact is outside counsel" or "contact is a corporate officer of the applicant."

Application Information

<u>Item 3</u>. Provide a brief description of the waiver request. For example, "Company A requests a waiver of the requirement in section 63.18(h) of the Commission's rules to provide information on interlocking directorates."

Application Fees

<u>Item 4</u>. An application fee is required for this form. Indicate whether you are exempt from the application fee by selecting "Yes" or "No."

Note that the FCC may not be able to start its review of a submitted application until the associated application fee is paid. To determine the required fee amount, refer to Subpart G of Part 1 of the Commission's Rules (47 CFR Part 1, Subpart G) and the current Fee Filing Guide. The current Fee Filing Guide can be downloaded from the FCC's website at http://www.fcc.gov/fees, by calling the FCC's Form Distribution Center at (800) 418-FORM (3676), or from the FCC's Fax Information System by dialing (202) 418-0177.

If "No," indicate the reason for fee exemption by checking "Government Entity", "Noncommercial educational license", or "Other."

If "No," then the Applicant must submit an attachment demonstrating the Applicant's eligibility for exemption from FCC application fees.

If Applicant selects "Other" as the reason for the exemption, the Applicant must explain in the text box.

If the Applicant filed a request for waiver/deferral of the FCC application fees, provide the datestamped copy of the request filed with the Commission's Office of the Managing Director as an attachment.

If "Yes," select the appropriate feed code for the application from the drop down menu. To determine the required fee amount, refer to Subpart G of Part 1 of the Commission's Rules (47 CFR Part 1, Subpart G) and the current Fee Filing Guide. The current Fee Filing Guide can be downloaded from the FCC's website at http://www.fcc.gov/fees, by calling the FCC's Form Distribution Center at (800) 418-FORM (3676), or from the FCC's Fax Information System by dialing (202) 418-0177.

Attachments

<u>Item 5</u>. The Applicant must confirm that it has uploaded a statement supporting the waiver request and identifying the rule number(s) involved, along with other material information by checking the box.

Confidential Treatment of Attachments

<u>Item 25.</u> Indicate whether the Applicant is requesting confidential treatment of an attachment(s) under 0.459 of the Commission's rules by checking "Yes" or "No."

If "Yes," then Item 25.a. requires the Applicant requesting confidential treatment of an attachment(s) under 0.459 of the Commission's rules must upload a request for confidentiality and file a redacted an no-redacted version of the request.

In the table in this item, the Applicant must identify the attachment(s) it has uploaded with a short description for easy identification of the information included in each attachment.

Note: Each document required to be filed as an attachment should be current as of the date of filing. Each page of every attachment must be identified with the number or letter, the number of the page, and the total number of pages.

In the table of this item, the Applicant may use the upload button to upload its attachments. After uploading, the Applicant can rename the attachment. Also after uploading, the Applicant can click the confidential treatment button next the attachment name if it so desires. Clicking the confidential treatment button will trigger a request to upload both a redacted, public version of the attachment and a public supporting statement justifying the confidentiality request. Identify the applicable rule(s) and provide other supporting materials or information. Documents designated for confidential treatment will not be publicly viewable in ICFS while the Commission considers the confidentiality request.

Certification Statements and Acknowledgements

<u>Item 7</u>. The Applicant must certify acknowledgement of all requirements listed here and elsewhere in this form, as appropriate, by clicking on the single indicated checkbox. These include:

- The Applicant certifies that it has submitted all statements and exhibits to support this waiver request.
- 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.".

Applicant certifies that all of its statements made in this Application 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.

Party Authorized to Sign

<u>Item 8</u>. Enter all of the required information in the table:

- the name of the Applicant.
- the title of the person signing the application. If the Applicant is a corporation or other business entity, the person submitting the application must be an officer.
- the signature of the person signing the application.

The Applicant does not enter a date. ICFS will fill in the date automatically with the date on which the application is submitted.

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)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503). BY SIGNING THIS, YOU CERTIFY THAT YOU ARE A PARTY AUTHORIZED TO SIGN AND ALL STATEMENTS MADE IN THIS APPLICATION AND IN THE ATTACHMENT OR DOCUMENTS INCORPORATED BY REFERENCE ARE MATERIAL, ARE PART OF THIS APPLICATION, AND ARE TRUE, COMPLETE, CORRECT, AND MADE IN GOOD FAITH.