

* Indicates required

FCC 230-
TC/ASG

FEDERAL COMMUNICATIONS COMMISSION

Notification of the Transfer of an International

Approved by OMB No.
3060-1028
Estimated time per
response: 1.5 hours

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See Instructions [↗](#) [Print Form](#) [↗](#)

Applicant/Signaling Point Operator/Assignor/Transferor Information

1. Applicant/Transferor

*FRN

Name

Doing Business As (DBA)

Street Address

Street Address 2

City

State

Zip Code/Postal Code



Country

Attention

Hua Lu
Attachment Uploaded
CORES admin user
Phone
2024182424
Fax
202 4185000
Email
hua.lu@fcc.gov
Legal Entity Type (Select One)
Individual

2. Transferor Contact Information

Check here if same as Assignor/Transferor

FRN
 0000000018
Name
Federal Communications Commission
Doing Business As (DBA)
Street Address
445 12th ST, NW
Street Address 2
City
Washington
State
 DC
Zip Code/Postal Code
20554
Country
USA
Attention
Hua Lu

Title

Attachment Uploaded
CORES admin user

Phone

2024182424

Fax

202 4185000

Email

hua.lu@fcc.gov


Relationship

-- None --

Applicant/Signaling Point Operator/Assignee/Transferee Information

3. Applicant/Transferee

*FRN

 0000000018

Name

Federal Communications Commission

Doing Business As (DBA)

Street Address

445 12th ST, NW

Street Address 2

City

Washington

State

 DC

Zip Code/Postal Code

20554

Country



USA

Attention

Hua Lu	Attachment Uploaded
Title	
CORES admin user	
Phone	2024182424
Fax	202 4185000
Email	hua.lu@fcc.gov
Legal Entity Type (Select One)	Individual

4. Transferee Contact Information

Check here if same as Assignee/Transferee

FRN	 0000000018
Name	Federal Communications Commission
Doing Business As (DBA)	
Street Address	445 12th ST, NW
Street Address 2	
City	Washington
State	 DC
Zip Code/Postal Code	20554
Country	USA
Attention	Hua Lu

Title

Attachment Uploaded
CORES admin user

Phone

2024182424

Fax

202 4185000

Email

hua.lu@fcc.gov

Transaction Information

*7. Brief Description Of Transaction

SPC-TC

8. Enter AuthID/ICFS file number of the code/codes that were transferred.

*8.a. AuthID(s):

✘ S240047 ✘ S240024

*8.b. File Number(s):

✘ SPC-NEW-20240712-00001

*9. Select the type of transfer

Merger

Explain

*10. Select the ISPC(s) associated with the transfer.

✘ SPC-T/C-20231027-00006

*11. Is this transfer of ISPC(s) associated with a transfer of control or assignment of an international section 214 authorization or other FCC action?

Yes No

*11a. If yes, Indicate the file number(s) of the associated international section 214 authorization and transfer of control/assignment application.

✘ ITC-214-20240712-00001

*12. Does the Transferee hold an international section 214 authorization?

Yes No

If yes, enter below the ICFS No(s) of the section 214 authorization.

*If no, please explain the proposed use of the International Signaling Point Code

Proposed SPC
Attachment Uploaded

* 13. Have the Applicants uploaded an attachment, providing a narrative description of the transfer of the ISPC.

Yes No

* 14. Provide the consummation date of the transaction.

2024-07-25



Application Fees

NOTE: Selecting "No" radio button will display the 7.a. below. Selecting "Other" displays 7.b.

* 7.a. If no, indicate reason for fee exemption.

Governmental Entity Noncommercial Educational License Other

* 15. Will a fee be paid?

Yes No

* 7.b. Fee exempt explanation.

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

DAP

Fee Amount

\$755

Waivers

* 16. Does this application include a request for a waiver of the Commission's rule(s)?

Yes No

If yes, attach the request with a supporting narrative and documentation.

* 16.a. Identify the rule section(s) for which a waiver is sought below.

16.b. Attach a statement explaining the waiver request and identifying the rule number(s) involved:

* Attach File

Attachments

* 17. The Applicant(s) has uploaded an attachment updating the information below if the information on file has been changed as a result of the transfer of the ISPC(s).

* 17.a. A statement regarding the nature of the use of the ISPC(s) in the network.

No Change Yes

* 17.b. A network diagram that shows how the ISPC(s) will be used.

No Change Yes

* 17.c. A statement regarding the signaling point manufacturer/type.

No Change Yes

* 17.d. The physical address where the ISPC(s) will be located.

No Change Yes

*17.e. Identification of at least one planned Message Transfer Part (MTP) signaling relation

No Change Attachment Yes

18. The Applicant has uploaded a statement supporting the waiver request and identifying the rule number(s) involved, along with other material information.




Yes N/A


Attachments/Confidential Treatment of Attachments

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

Yes No

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.	File Name	Description of Attachment	Confidential	Action
1 (a) Confidential Non-Redacted Version	SPC.docx	Form Attachment	<input checked="" type="checkbox"/>	
(b) Public Redacted Version		Upload Public Redacted Filing		
(c) Public Version of Confidential Treatment Request and Supporting Statement		Upload Public Version of Confidential		

Attach File 

General Certification Statements

*20. In submitting this form,

- The Applicant(s) certifies that the ISPC(s) has been in continuous use and will continue to be used in accordance with the conditions of its provisional assignment.
- The Applicant(s) acknowledges that a grant of an ISPC is a provisional assignment and the Applicant does not have a property right in an ISPC(s).
- The Applicant(s) acknowledges that the Commission may reclaim an assigned ISPC(s) and reassign it.
- The Applicant(s) acknowledges that an ISPC cannot be transferred except in the case of a merger, acquisition, divestiture, or joint venture. The Applicant(s) will notify the Commission of any such action by filing an SPC-TC form within thirty (30) days of the action.
- The Applicant(s) 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) certify that all of its statements made in this application and in the attachments or documents incorporated by reference are material, are part of this notification form, and are true, complete, correct, and made in good faith.

Parties Authorized to Sign

21. Applicant/Signaling Point Operator/Assignor/Transferor Signature

First Name

Last Name

MI

Suffix

Title

Signature

Date

FAILURE TO SIGN THIS FORM MAY RESULT IN DISMISSAL
OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID

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 LICENSE OR CONSTRUCTION PERMIT
(U.S. Code, Title 47, Section 35, AND/OR FORFEITURE (U.S. Code, Title 47, Section 503)

22. Applicant/Signaling Point Operator/Assignee/Transferee Signature

First Name

Last Name

MI

Suffix

Title

Signature

	Attachment Uploaded	
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Date

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FAILURE TO SIGN THIS FORM MAY RESULT IN DISMISSAL
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