

* Indicates required
FCC 230
SPC-NEW

FEDERAL COMMUNICATIONS COMMISSION

FCC Application for an International Signaling Point Code (ISPC)

Approved by OMB
3060-1028
Estimated Time Per Response: 3 hours
Edition Date: August 2024

Save as Draft

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

Review to Submit

1. Applicant Information

*FRN

Name Attention

Doing Business As (DBA) Title

Street Address Phone

Street Address 2 Fax

City Email

State

Zip Code/Postal Code

Country

*Applicant/Licensee Legal Entity Type

-- None --

- None --
- Individual
- Unincorporated Association
- Government Entity
- Corporation
- Limited Liability Company
- General Partnership**
- Limited Partnership
- Limited Liability Partnership
- Other
- None --

2. Contact Information

Check here if same as Applicant

*FRN

Name Attention

Doing Business As (DBA) Title

Street Address Phone

Street Address 2 Fax

City Email

Contact State

Zip Code/Postal Code

Country

*Relationship

-- None --

- None --
- Same
- Legal counsel
- Engineer
- Other**

* 3. Brief Application Description

* 4. How many ISPCs is the Applicant Requesting?

* 5. Enter location(s) where the ISPC(s) will be implemented.

Actions	1) City	2) State/U.S. Territory	3) Estimated In-service Date
	Centreville	AZ	2024-07-24

* 6. Does the Applicant hold an international section 214 authorization?
 Yes No

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

Application Fees

*7. Will a fee be paid? **NOTE: Selecting "No" radio button will display the 7.a. below. Selecting "Other" displays 7.b.:**

Yes No

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

Governmental Entity Noncommercial Educational License Other

*7.b. Fee exempt explanation.

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

Fee Amount

Waivers

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

Yes No

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

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

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

Attachments

*9. The Applicant has uploaded an attachment containing the information below and described in the filing instructions:

- A statement regarding the nature of the use of the ISPC(s) in the network.
- A network diagram that shows how the ISPC(s) will be used.
- A statement regarding the signaling point manufacturer/type.
- The physical address where the ISPC(s) will be located.
- Identification of at least one planned Message Transfer Part (MTP) signaling relation.

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

Attachments/Confidential Treatment of Attachments

*11. 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	<input type="checkbox"/>	<input type="button" value="✕"/>
(b)	Public Redacted Version	Form Attachment	<input checked="" type="checkbox"/>	<input type="button" value="✕"/>
(c)	Public Version of Confidential Treatment Request and Supporting Statement	Upload Public Redacted Filing	<input type="checkbox"/>	<input type="button" value="✕"/>
		Upload Public Version of Confidential Treatment Request (with supporting statement, identifying	<input type="checkbox"/>	<input type="button" value="✕"/>

General Certification Statements

*12. In submitting this form,

- The Applicant certifies that it will implement the ISPC assignment(s) within twelve (12) months of assignment.
- If the Applicant fails to provide timely notification, the ISPC assignment(s) will be returned to the Commission and made available for reassignment.
- The Applicant 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 acknowledges that the Commission may reclaim an assigned ISPC(s) and reassign it.
- The Applicant acknowledges that an ISPC cannot be transferred except in the case of a merger, acquisition, divestiture, or joint venture. The Applicant will notify the Commission of any such action by filing an SPC-TC form within thirty (30) days of the action.
- 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 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.

13. Party Authorized to Sign

*First Name

MI

*Last Name

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 312(a)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503)

Allow Internal Users to View Draft if in Draft State

Required information

Attachment 1 Uploads

1. FIRM	2. Applicant License Legal Entity type	3. FIRM Relationship	3. Brief Application Description	4. How many ISPCs is the Applicant Requesting?	5.a. Identify the rule section(s) for which a waiver is sought below.		
9. The Applicant has uploaded an attachment containing the information below and described in the filing instructions:			10. The Applicant has uploaded a statement supporting the waiver request and identifying the rule number(s) involved, along with other material information.		12. In submitting this form.	First Name	Last Name
Title	Signature						