

FEDERAL COMMUNICATIONS COMMISSION

Waiver Application for International Section 214 Authorization

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

A.1 Waiver Parent File Number

A.2 Waiver Parent Callsign

1. Applicant Information

FRN

Name

Doing Business As (DBA)

Street Address

Street Address 2

City

State

Zip Code/Postal Code

Country

Attention

Title

Phone

Fax

Email

*Applicant/Licensee Legal Entity Type

-- None --

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

2. Contact Information

Check here if same as Applicant

*FRN

Name

Doing Business As (DBA)

Attention

Title

Street Address

Street Address 2

City

Contact State

Zip Code/Postal Code

Country

Phone

Fax

Email

*Relationship

-- None --

-- None --

Same

Legal counsel

Engineer

Other

Application Information

*3. Brief Waiver Request Description.

Application Fees

4. Will a fee be paid?

Yes No

If "no" and "other" are selected:

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

Governmental Entity Noncommercial Educational License Other

*4.b. Fee exempt explanation.

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

Fee Amount

\$0

Attachments

5. 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

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

General Certification Statements

*7. In submitting this form,

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. (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.

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

9. Party Authorized to Sign

* First Name	MI
<input type="text"/>	<input type="text"/>
* Last Name	Suffix
<input type="text"/>	<input type="text"/>
* Title	
<input type="text"/>	
* Signature	Date
<input type="text"/>	<input type="text"/>

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)

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