**FCC Form 230**

**SPC-WAV**

**Not Yet Approved by OMB**

**3060-1028**

**May 2025**

**FEDERAL COMMUNICATIONS COMMISSION**

**Instructions for Filing an**

**International Signaling Point Code Waiver Application**

**Office of International Affairs**

**SPC-WAV**

**Purpose of Form**

This form is used by signaling point operators to request a waiver with the Federal Communications Commission (Commission) of a requirement for an international signaling point code (ISPC) assignment for Signaling System No. 7 networks. Under [ITU-T Recommendation Q.708 (3/99)](https://www.itu.int/rec/T-REC-Q.708-199903-I/en), an ISPC(s) can be assigned to signaling point operators by each Member State’s designated Administrator in accordance with the rules and procedures of the Member State and ITU-T Recommendation Q.708.

The Commission is the administrator of ISPCs for the United States and administers all ISPCs. Through this form, the Commission will collect information concerning the proposed request for waiver of ISPC assignment requirements and will determine whether to grant that waiver.

**Who Must File This Form and When**

Every signaling point operator seeking a post-assignment waiver of an ISPC requirement must submit this form. This form is not necessary when seeking a waiver at the time an ISPC assignment request is filed. In that case, the waiver request is included as an attachment to the assignment application (SPC-NEW).

**Description of Form**

This form consists of a main form and the ability to file attachment(s). 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 [1.65](https://gov.ecfr.io/cgi-bin/text-idx?SID=fd59973f4873091746842bae50c2ba1b&mc=true&node=se47.1.1_165&rgn=div8) of the Commission’s rules. The Applicant or the party to the application must notify the Commission regarding any substantial and significant changes in the information furnished in the application while it remains pending. Under ITU-T Recommendation Q.708, the Applicant must also inform the Commission of any change of information after an ISPC is assigned (e.g., a change of the city where the code is implemented).

* **ISPC Amendment Form**. To amend a submitted application (including a pending amendment), use a separate form, SPC-AMD.

**Applicable Rules and Regulations**

The requirements can be found in ITU-T Recommendation Q.708, which also lists relevant definitions and the criteria for the transfer of ISPCs.

* ITU-T Recommendation Q.708, SERIES Q: SWITCHING AND SIGNALLING Specifications of Signalling System No. 7 – Message transfer part (MTP), Assignment procedures for international signalling point codes, <https://www.itu.int/rec/recommendation.asp?lang=en&parent=T-REC-Q.708-199903-I> .

Applicants should refer to the Debt Collection Improvement Act of 1996. The Debt Collection Act requires all federal agencies ensure that no debtors to the Federal government obtain any licenses or other benefits from the FCC. To ensure this, the Commission must collect FRN information to correlate its Applicants with any outstanding Federal debt that they might have incurred in other dealings with the Federal government. For additional information, *see* the FCC’s Debt Collection webpage,

<https://www.fcc.gov/licensing-databases/fees/debt-collection-improvement-act-implementation>.

**Other ISPC Forms**

* **ISPC New Form**
  + This is the application for seeking assignment of a new ISPC.
* **ISPC Amendment Form**
  + To amend a submitted application, an Applicant must use a separate form, SPC-AMD.
* **ISPC Transfer Form** ISPCs are not transferable between signaling point operators.
  + In the case of a merger, acquisition, divestiture, or joint venture, signaling point operators must use a SPC-T/C form.
* **ISPC Modification Form**
  + If needed, after an ISPC assignment is granted, an Applicant may file a modification request by using a SPC-MOD form.

**FCC Notice Required By The Paperwork Reduction Act**

We have estimated that each response to this collection of information (using in-house staff) will take no more than one hour. Our estimate includes the time for in-house staff 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](mailto:pra@fcc.gov) or send them to the Federal Communications Commission, AMDPERM,

Paperwork Reduction Project (3060-1028), 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 3060-1028. 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 technical assistance with completing the forms, contact the ICFS Helpline at (202) 418-2222 or [ICFSINFO@fcc.gov](mailto:ICFSINFO@fcc.gov). For general questions about the form requirements, contact the Office of International Affairs, Telecommunications and Analysis Division at [FCC-OIA-TAD@fcc.gov](mailto:FCC-OIA-TAD@fcc.gov) or at (202) 418-1480.

**FILING INSTRUCTIONS FOR MAIN SPC-WAV FORM**

**Applicant Information**

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

When the Applicant enters its FRN, the Applicant 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.

Enter any missing data and sections that are not already populated from CORES, such as the “Applicant/Licensee Legal Entity Type” or “Doing Business As (DBA)” name.

**Contact Information**

Item 2. 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 the “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 by making a selection from the drop-down menu. For example, select “Legal Counsel” if the contact is the Applicant’s counsel.

**Brief Application Description**

Item 3. Provide a short description of the requirement for which you are seeking a waiver. For example, “This is an application for waiver of ITU-T Recommendation Q.708’s provision that ISPCs not be assigned on a permanent basis for test purposes.” This description will appear in the My Filings tab of your ICFS account page where all your applications are listed.

**Application Fees**

Item 4. An application fee is required for this form. If you are exempt from the application fee select “No.” Otherwise, select “Yes.”

**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](https://gov.ecfr.io/cgi-bin/text-idx?SID=fd59973f4873091746842bae50c2ba1b&mc=true&node=sp47.1.1.g&rgn=div6)) and the current Fee Filing Guide. The current Fee Filing Guide can be downloaded from the FCC’s website at https://www.fcc.gov/licensing-databases/fees/application-processing-fees, by calling the FCC’s Form Distribution Center at (800) 418-FORM (3676), or from the FCC’s Fax Information System by dialing 1-866-418-0232.

Items 4a and 4b. If the Applicant is claiming a fee exemption it must select a reason in question 4a. An attachment demonstrating the Applicant’s eligibility for exemption from FCC application fees must be submitted. If the reason is “Other,” briefly describe your rationale in the text box provided. If a request for waiver/deferral of the FCC application fees has been filed with the FCC, provide the date-stamped copy of the request filed with the Commission’s Office of the Managing Director as an attachment in

­If the Applicant answered “Yes” to question 4, it must select the correct fee code here in question 4b. The fee code is DAF. Select this fee code.

**Attachments**

Item 5. Confirm by checking “Yes” that you have submitted an attachment to support the waiver request. Provide a single attachment in a machine readable format. The statement must identify the section(s) of ITU-T Recommendation Q.708 involved, along with other material information supporting the waiver request.

**Attachments/Confidential Treatment of Attachments**

Item 6. If the Applicant is requesting confidential treatment for any of its attachments, answer “Yes” to this question. Otherwise, answer “No.” If the Applicant answers “yes” in Item 6, then it 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 which follows below.

The Applicant(s) can upload attachments in this section of the application. The Applicant(s) will identify the attachment(s) with a short name to easily identify 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 this item, the Applicant may use the upload button to upload its attachments. After uploading, the Applicant can describe 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 in the attachment 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.

**General Certification Statements**

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

* **Submission of supporting statement**. All applicants must certify to submission of all statements and exhibits to support the waiver request.
* **Section 5301 of the Anti-Drug Act of 1988 certification.** All applicants must certify that neither they 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 Act of 1988, 21 U.S.C. Section 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.
* **Application is true and correct**. All applicants must certify that 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.

**Party Authorized to Sign**

Items 8. Enter all of the requested information. Willful false statements are punishable by fine and or/imprisonment (U.S. Code, Title 18, Section 1001). 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.

Enter 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.

Do not enter the date in the last box. The date will be filled automatically upon submission of the application.

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).