

Categories of Services for 214 Applications
(Streamline/Non-streamline)

- ASSIGNMENT OF LICENSE
- GLOBAL FACILITIES-BASED SERVICE
- GLOBAL FACILITIES-BASED/GLOBAL RESALE SERVICE
- GLOBAL RESALE SERVICE
- INDIVIDUAL FACILITIES-BASED SERVICE
- INTERCONNECTED PRIVATE LINE RESALE SERVICE
- LIMITED GLOBAL FACILITIES-BASED SERVICE/LIMITED GLOBAL RESALE SERVICE
- LIMITED GLOBAL FACILITIES-BASED SERVICE
- LIMITED GLOBAL RESALE SERVICE
- INMARSAT AND MOBILE SATELLITE SERVICE
- SWITCHED RESALE SERVICE
- TRANSFER OF CONTROL
- SUBMARINE CABLE LANDING LICENSE
- INTERNATIONAL SPECIAL PROJECT

Description of Application: _____

FCC/MILLON



MAR 22 1999

A printable copy of your application follows. To print a copy of this form use the 'Print' selection within the 'File' menu of your web browser.

FEDERAL COMMUNICATIONS COMMISSION FCC 159, FCC REMITTANCE ADVICE	Approved by OMB 3060-0589 Expires 8/31/97
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PAYOR INFORMATION

(1) FCC ACCOUNT NUMBER	Did you have a number prior to this? Enter it.		(2) TOTAL AMOUNT PAID (Dollars and cents)
0341763924			\$ 780
(3) PAYOR NAME			(4) PAYOR TIN
(If paying by check, enter name exactly as it appears on your check)			
Erie-Raiduha, Inc.			
(5) STREET ADDRESS LINE NO. 1	P. O. Box 30010		
(6) STREET ADDRESS LINE NO. 2	Cleveland		
(7) CITY	(8) STATE	(9) ZIP CODE	
Cleveland	OH	44130	
(10) DAYTIME TELEPHONE NUMBER (Include area code)	(11) COUNTRY CODE (if not U.S.A)		
440-237-1721	USA		
(12A) NAME OF APPLICANT, LICENSEE, REGULTEE, OR DEBTOR	(13A) APPLICANT TIN	FCC USE ONLY	
Erie-Raiduha, Inc.			
(14A) FCC CALL SIGN/OTHER ID	(15A) ZIP CODE	(16A) PAYMENT TYPE CODE	(17A) QUANTITY (18A) FEE DUE FOR PAYMENT TYPE CODE IN BLOCK 14
	44133	CUT	1
(19A) FCC CODE 1	(20A) FCC CODE 2		
		IB1999000047	
(21A) ADDRESS LINE NO. 1	(22A) ADDRESS LINE NO. 2	(23A) CITY/STATE or COUNTRY CODE	
9376 Abbey Road		Cleveland, OH	

(23)	MASTERCARD/VISA ACCOUNT NUMBER:	EXPIRATION DATE:
 	<input type="text"/>	<input type="text"/>
(24)	AUTHORIZED SIGNATURE:	TODAY'S DATE:
I hereby authorize the FCC to charge my VISA or Mastercard for the service(s)/authorization(s) herein describe.		
	<input type="text"/>	<input type="text" value="3/19/99"/>

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NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT

Section 9 of the Communications Act authorizes the FCC to request the information on this form. The information requested is required to recover costs incurred in carrying out its enforcement activities, policies and rulemaking activities, user information services, and international activities. The form will be used primarily to capture paper information in order to speed the refund process and maintain required accounts receivable information. It will also be used to collect fines and debts due the Commission.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to the Federal Communications Commission, Records Management Division, AMD-PIRS, Washington, DC 20554, and to the Office of Management and Budget, Office of Information and Regulatory Affairs, Paperwork Reduction Project (3060-0589), Washington, DC 20503.

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[Mail your comments or suggestions \(To: webmail@fcc.gov\)](mailto:webmail@fcc.gov)
[FCC - Federal Communications Commission - FCC 159](#)

**FEDERAL COMMUNICATIONS COMMISSION
INTERNATIONAL SECTION 214 APPLICATION**

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APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:

ERI Communications

1. Applicant

Name:	<input type="text" value="Erie-Raiduha, Inc."/>	Phone Number:	<input type="text" value="440-237-1721"/>
DBA Name:	<input type="text" value="ERI Communications"/>	Fax Number:	<input type="text" value="440-230-1556"/>
Street:	<input type="text" value="9376 Abbey Road"/>	E-Mail:	<input type="text" value="eri@tradeforce.com"/>
City:	<input type="text" value="Cleveland"/>	State:	<input type="text" value="OH"/>
Zipcode:	<input type="text" value="44133"/>	Country:	<input type="text" value="USA"/>
Attention:	<input type="text" value="Natalie Bilokonsky"/>		

2. Contact

Name:	<input type="text" value="Natalie Bilokonsky"/>	Phone Number:	<input type="text" value="440-237-1721"/>
Company:	<input type="text" value="ERI Communications"/>	Fax Number:	<input type="text" value="440-230-1556"/>
Street:	<input type="text" value="9376 Abbey Road"/>	E-Mail:	<input type="text" value="eri@tradeforce.com"/>
City:	<input type="text" value="Cleveland"/>	State:	<input type="text" value="OH"/>
Zipcode:	<input type="text" value="44133"/>	Country:	<input type="text" value="USA"/>
Contact Title:	<input type="text" value="Vice President"/>	Relationship:	<input type="text" value="Same"/>

3. Place of Incorporation of Applicant

4. Other Company(ies) and Place(s) of Incorporation

5. Service Type(s) (check all that apply)

- Global or Limited Global Facilities-Based Service (Section 63.18(e)(1))
- Global or Limited Global Resale Service (Section 63.18(e)(2))
- Global or Limited Global Facilities-Based and Resale Service (Section 63.18(e)(1) & (2))
- Individual Facilities-Based Service (Section 63.18(e)(6))
- Individual Switched Resale Service (Section 63.18(e)(6))
- Individual Facilities-Based and Resale Service (Section 63.18(e)(6))
- Switched Services over Private Lines (ISR) (Section 63.18(e)(3) or (4))
- Inmarsat and Mobile Satellite Service (Section 63.18(e)(6))
- Overseas Cable Construction (Section 63.18(e)(6))
- Individual Non-Interconnected Private Line Resale Service (Section 63.18(e)(6))
- Individual Interconnected Private Line Resale Service (Section 63.18(e)(6))
- Other (Section 63.18(e)(6))

6. Fee Classification **CUT - Section 214 Authority**

7. Destination Country(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or "Countries X, Y, and Z only")
 All international points

8. Caption (description of authority requested, e.g., Application for Authority to Provide International Facilities-Based and Resold Services to All International Points Except Country X)
 Application for Authority to Provide International Resold Services to All Internat

9. Does the applicant request streamlined processing pursuant to 47 C.F.R. Section 63.18(h)(1)(i) or (j)? If yes, include in Attachment 1 a statement of how the application qualifies for streamlined processing. Yes No

10. If applying for authority to provide switched services over private lines pursuant to Section 63.18(e)(3) or (e)(4), provide the required showing in Attachment 1.

Applicant certifies that its responses to questions 11 through 17 are true:

11. If the applicant is a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.18(h)(1)(i)) with a foreign carrier, provide in Attachment 1 the information and certifications required by Section 63.18(h)(1) and (3)-(8). Yes No

12. Does the applicant seek authority to provide service to any destination where it is a foreign carrier, controls a foreign carrier, or has an affiliation within the meaning of Section 63.18(h)(1)(i)(B) with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 12. Yes No

13. Does the applicant seek authority to provide service to any destinations other than those listed in response to question 12 where it has an affiliation within the meaning of Section 63.18(h)(1)(i)(A) with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 13. Yes No

14. [Section 63.18(h)(2)] In Attachment 2, provide the name, address, citizenship and principal business of the applicant's ten percent or greater direct and indirect shareholders or other equity holders, and identify any interlocking directorates.

15. In Attachment 1, respond to paragraphs (d), (e)(6) and (g) of Section 63.18.

16. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application

is subject to a denial of Federal benefits that includes 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. Yes No

17. By checking Yes, the applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future. Yes No

CERTIFICATION

18. Typed Name of Person Signing
 Natalie Bilokonsky

19. Title of Person Signing
 Vice President

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

20. Attachment 1:

Attachment 2:

Attachment 3: