INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

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

Applicant of Teledata Solutions, d/b/a TSI for Authority Pursuant to Section 214 to Operate as an International Facilities—based and Resale Carrer.

1. Applicant				
Naı	me:	Teledata Solutions, Inc. d/b/a TSI	Phone Number:	805-277-0400
DB. Nai			Fax Number:	800-624-9831
Stro	eet:	200 N. Westlake Blvd	E-Mail:	
		Suite 104		
City	y :	Westlake Village	State:	CA
Cou	untry:	USA	Zipcode:	91362 –
Att	ention:	Mr Jeff L Daniels		

				-
2. Contact				
	Name:	Teledata Solutions, Inc. d/b/a TSI	Phone Number:	805-277-0400
	Company:		Fax Number:	800-624-9831
	Street:	200 N. Westlake Blvd	E-Mail:	
		Suite 104		
	City:	Westlake Village	State:	CA
	Country:	USA	Zipcode:	91362 –
	Attention:	Mr Jeff L Daniels	Relationship:	
3. Place of	Incorporation	n of Applicant Nevada		
4. Other Co	ompany(ies) a	and Place(s) of Incorporation		
5. Service	Type(s) (chec	k all that apply)		
	• •	d Global Facilities–Based Authority	(Section 63.18(e)(1))	
★ Glo	bal or Limited	d Global Resale Authority (Section of	63.18(e)(2))	
Indi	vidual Facilit	ies-Based Service (Section 63.18(e)	(3))	
Indi	vidual Switch	ned Resale Service (Section 63.18(e)	(3))	
Indi	vidual Facilit	ies-Based and Resale Service (Secti	on 63.18(e)(3))	
Swi	tched Service	s over Private Lines (ISR) (Section 6	53.16 and/or 63.18 (e)(3))	
Inm	arsat and Mol	bile Satellite Service (Section 63.18)	(e)(3))	
Ove	rseas Cable C	Construction (Section 63.18(e)(3))		
Indi	vidual Non–I	nterconnected Private Line Resale S	ervice (Section 63.18(e)(3))	
Othe	er (Section 63	3.18(e)(3))		

	nitted with this application?
"="	blete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
Government	tal Entity Noncommercial educational licensee
Other(please	e explain):
6b. Fee Classific	cation CUT – Section 214 Authority
7. Destination C "Countries X, Y,	ountry(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or and Z only".) All international points
All International	ription of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to Points Except Country X) the description does not appear in this box, please go to the end of the form to view it in its entirety.)
	Application for Authority to Provide International Facilities-based and Resold Services to All International Points.
Attachment 1 a	licant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Statement of how the application qualifies for streamlined processing. For authority to provide switched services over private lines pursuant to Section 63.16, provide the required showing in

Applicant c	ertifies that	its responses	to questions	11 through 1'	7 are true:

15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.

represent certifies that its responses to questions 11 anough 17 are true.		
11. If the applicant is a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign carrier, provide in Attachment 1 the information and certifications required by Section 63.18(i) through (m).		
12. Does the applicant seek authority to provide service to any destination described in paragraphs (1) through (4) of Section 63.18(j)? If yes, list those destinations in Attachment 1 as a response to question 12.	O 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 with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 13.	O Yes	No
14. [Section 63.18(h)] 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.		

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	0	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	0	No

CERTIFICATION

8. Typed Name of Person Signing eff L. Daniels	19. Title of Per President	19. Title of Person Signing President		
(U.S. Code, Title 18, Sec	MADE ON THIS FORM ARE PUNISHA etion 1001), AND/OR REVOCATION OF a ection 312(a)(1)), AND/OR FORFEITURE			
20. 1: Question #9 Reply	2: Question 14–15 Reply	3:		

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