INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: RH Telecom 214 Application for Global Facilities—based and Resale Authority

RH Telecom, Inc.	Phone Number:	213-489-3780
	Fax Number:	213–489–3780
624 S. Grand Av.	E-Mail:	hfarah@social.rr.com
Suite 100		
Los Angeles	State:	CA
USA	Zipcode:	90017 –
: Mr Hussein Farah		
	624 S. Grand Av. Suite 100 Los Angeles USA	Fax Number: 624 S. Grand Av. E-Mail: Suite 100 Los Angeles State: USA Zipcode:

2. Contact			
Name:	Hope Halpern	Phone Number:	914–428–9695
Company:	Chatterbox Services, Inc.	Fax Number:	914–206–4570
Street:	P.O. Box 111	E-Mail:	hope@chatterboxsvs.com
City:	Purchase	State:	NY
Country:	USA	Zipcode:	10577 –
Attention:	Hope Halpern	Relationship:	Legal Counsel
2 Dl			
3. Place of Incorporation			
4. Other Company(ies) a	and Place(s) of Incorporation		
5. Service Type(s) (chec			
	d Global Facilities–Based Authori		
Global or Limited	d Global Resale Authority (Section	on 63.18(e)(2))	
Individual Facilit	ies–Based Service (Section 63.18	(e)(3))	
Individual Switch	ned Resale Service (Section 63.18	(e)(3))	
Individual Facilit	ies-Based and Resale Service (Se	ection 63.18(e)(3))	
Switched Service	s over Private Lines (ISR) (Section	on 63.16 and/or 63.18 (e)(3))	
Inmarsat and Mol	bile Satellite Service (Section 63.	18(e)(3))	
Overseas Cable C	Construction (Section 63.18(e)(3))		
<u> </u>	nterconnected Private Line Resale		
Other (Section 63			

 6a. Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): 6b. 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 permissible 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) (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)
Governmental Entity Noncommercial educational licensee Other(please explain): 6b. 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 permissible 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)
Other(please explain): 6b. Fee Classification
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Application for Authority to Provide International Facilities based and Resold Services to All Permissible International Points
9. Does the applicant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Attachment 1 a statement of how the application qualifies for streamlined processing. 10. If applying for authority to provide switched services over private lines pursuant to Section 63.16, provide the required showing in Attachment 1.

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 in an ough 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	٥	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	٥	No

CERTIFICATION

Typed Name of Person Signing sein Farah	19. Title of Po CEO	19. Title of Person Signing CEO	
(U.S. Code, Title 18, Secti	MADE ON THIS FORM ARE PUNISH ion 1001), AND/OR REVOCATION OF tion 312(a)(1)), AND/OR FORFEITUR		IMENT
20. 1: RHT 214 Attachment 1	2: rht214attachment2	3:	

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