INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Section 214 Application for Facilites Based and Resale Long Distance

plicant					
Name:	TDS LONG DISTANCE CORPORATION	Phone Number:	608-664-4000		
DBA Name:		Fax Number:			
Street:	525 Junction Road	E–Mail:	jennifer. lautenschleger@tdstelecom.com		
City:	Madison	State:	WI		
Country:	USA	Zipcode:	53717 – 1799		
Attention:	Jennifer Lautenschleger				

2. Contact					
2. Contact					
	Name:	Yaron Dori	Phone Number:	202-662-5444	
	Company:	Covington & Burling LLP	Fax Number:	202-778-5444	
	Street:	1201 Pennsylvania Avenue N.W.	E-Mail:	ydori@cov.com	
	City:	Washington, D.C.	State:	DC	
	Country:	USA	Zipcode:	20004 –	
	Attention:	Yaron Dori	Relationship:	Legal Counsel	
3. Place of	Incorporation	n of Applicant Delaware			
4. Other C	ompany(ies) a	and Place(s) of Incorporation			
. a :	T. ()(1	1 11.4 1 .			
	• 1	k all that apply) d Global Facilities—Based Authority	(Section 63.18(e)(1))		
		d Global Resale Authority (Section			
		ies-Based Service (Section 63.18(e)			
		ned Resale Service (Section 63.18(e)			
		ies-Based and Resale Service (Section			
		es over Private Lines (ISR) (Section of			
		bile Satellite Service (Section 63.18)			
		Construction (Section 63.18(e)(3))	(6)(3))		
			aming (Section 62.19(a)(2))		
		interconnected Private Line Resale S	ervice (Section 63.18(e)(3))		
Oth	Other (Section $63.18(e)(3)$)				

	ed with this application? e and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
"	
	Entity Noncommercial educational licensee
Other(please ex	xplain):
6b. Fee Classificati	on CUT – Section 214 Authority
7. Destination Cour "Countries X, Y, an	ntry(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or d Z only".) All international points
All International Po	tion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to bints Except Country X) 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 sta	ant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in tement of how the application qualifies for streamlined processing. 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 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

18. Typed Name of Person Signing (Must be a Corporate Jung	· · · · · · · · · · · · · · · · · · ·	19. Title of Person Signing Vice President		
· · · · · · · · · · · · · · · · · · ·	DE ON THIS FORM ARE PUNIS 001), AND/OR REVOCATION (312(a)(1)), AND/OR FORFEITU	F ANY STATION AUTHORIZA	ATION	
20. 1: Attachment 1	2: Attachment 2	3:		

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