INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Application for authority to provide facilities—based service

1. Applicant				
Name:	NewCom Holdings	Phone Number:	714–209–9090	
DBA Name:		Fax Number:	714–594–6159	
Street:	9039 Bolsa Ave.	E-Mail:	info@loginvn.com	
	Suite 210			
City:	Westminster	State:	CA	
Country:	USA	Zipcode:	92683 –	
Attention:	Mr Hung Tran			

2. Contact					
	Name:	Hung Tran	Phone Number:	714–308–3800	
	Company:	NewCom Holdings	Fax Number:	714–594–6159	
	Street:	9039 Bolsa Ave.	E-Mail:	info@loginvn.com	
		Suite 210			
	City:	Westminster	State:	CA	
	Country:	USA	Zipcode:	92683 –	
	Attention:	Hung Tran	Relationship:	Same	
3. Place of	f Incorporation	n of Applicant California			
4. Other C	Company(ies) a	and Place(s) of Incorporation			
5. Service	Type(s) (chec	k all that apply)			
▼ Glo	bal or Limited	d Global Facilities-Based Author	ority (Section 63.18(e)(1))		
▼ Glo	bal or Limited	d Global Resale Authority (Sect	ion 63.18(e)(2))		
Ind	ividual Facilit	ies-Based Service (Section 63.1	8(e)(3))		
Ind	ividual Switch	ned Resale Service (Section 63.1	8(e)(3))		
Ind	Individual Facilities—Based and Resale Service (Section 63.18(e)(3))				
Sw	Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))				
Inn	Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))				
Ove	Overseas Cable Construction (Section 63.18(e)(3))				
Ind	Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))				
Oth	Other (Section 63.18(e)(3))				

	ted with this application? te 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 e	explain):
6b. Fee Classificat	ion CUT – Section 214 Authority
7. Destination Cou "Countries X, Y, and	untry(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 P	otion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to Points 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 facilities-based service in accordance with Section 68.18(e)(1) of the rules, and also to provide service in accordance with Section 6.18(e)(2) of the rules.
Attachment 1 a sta	ant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in atement 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 Corp Hung Tran	orate Officer)	19. Title of Person Signing President		
WILLFUL FALSE STATEMENTS MAD (U.S. Code, Title 18, Section 1 (U.S. Code, Title 47, Section 2	001), AND/OR REV	OCATION OF ANY S'	TATION AUTHORIZATION	
20. 1: Attachment 1	2: Attachment 2		3:]

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