## INTERNATIONAL SECTION 214 APPLICATION FCC FORM 214 FOR OFFICIAL USE ONLY

## APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Application for International Section 214 Authority

Name:	Wireless Maritime Services, LLC	Phone Number:	404–986–9638
DBA Name:		Fax Number:	
Street:	1025 Lenox Park Blvd NE	E-Mail:	
	Office A423		
City:	Atlanta	State:	GA
<b>Country:</b>	USA	Zipcode:	30319 –
Attention:	Andy Hearn		

2. Contact				
	Name:	William L. Roughton, Jr.	Phone Number:	202-457-2040
	Company:	AT&T Services, Inc.	Fax Number:	
	Street:	1120 20th Street, NW	E-Mail:	wr757k@att.com
		Suite 1000		
	City:	Washington	State:	DC
	<b>Country:</b>	USA	Zipcode:	20036 –
	<b>Attention:</b>		Relationship:	
3. Place of	f Incorporation	n of Applicant Delaware		
4. Other C	Company(ies) a	and Place(s) of Incorporation		
5. Service	Type(s) (chec	k all that apply)		
<b>▼</b> Glo	bal or Limited	d Global Facilities-Based Autho	ority (Section 63.18(e)(1))	
<b>▼</b> 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	ividual Facilit	ies-Based and Resale Service (S	Section 63.18(e)(3))	
Sw	itched Service	es over Private Lines (ISR) (Sect	ion 63.16 and/or 63.18 (e)(3))	
Inn	narsat and Mol	bile Satellite Service (Section 63	3.18(e)(3))	
Ov	erseas Cable C	Construction (Section 63.18(e)(3	))	
Ind	ividual Non–I	nterconnected Private Line Resa	ale Service (Section 63.18(e)(3))	
Oth	ner (Section 63	3.18(e)(3))		

	ed with this application?  te and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
<b>G</b> Governmental	Entity Noncommercial educational licensee
Other(please ex	xplain):
6b. Fee Classificati	on CUT – Section 214 Authority
7. Destination Courum Countries X, Y, and	ntry(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or ad Z only".) All international points, except those listed on the Exclusion List
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 of Wireless Maritime Services, LLC for authority to provide international facilities− based and resold services to all international points except countries included on the FCC's Exclusion List.
	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.
10. If applying for Attachment 1.	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.

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 63.09(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.	•	Yes	0	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.	0	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 Andy Hearn	orate Officer) 19. Title o CEO	19. Title of Person Signing CEO					
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. 1: Attachments	2:	3:					

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