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: 214 Application

icant			
Name:	Pacific Telephone Company LLC	Phone Number:	2132199033
DBA Name:		Fax Number:	8058236522
Street:	P.O. Box 215	E–Mail:	larry. levine@pacifictelephoneservice. com
City:	Moorpark	State:	CA
Country:	USA	Zipcode:	93020 –
Attention:	Mr Larry J Levine		

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''	Contact
<i>_</i> -	Contact

Name: Larry Levine Phone Number: 2132199033

Company: Pacific Telephone Company LLC Fax Number: 8058236522

Street: P.O. Box 215 E–Mail: larry.

levine@pacifictelephoneservice.

com

City: Moorpark State: CA

Country: USA **Zipcode:** 93020 - 215

Attention: Larry Levine **Relationship:** Same

3. Place of Incorporation of Applicant

4. Other Company(ies) and Place(s) of Incorporation California

5. Service Type(s) (check all that apply)					
Global or Limited Global Facilities–Based Authority (Section 63.18(e)(1))					
Global or Limited Global Resale Authority (Section 63.18(e)(2))					
Individual Facilities—Based Service (Section 63.18(e)(3))					
Individual Switched Resale Service (Section 63.18(e)(3))					
Individual Facilities—Based and Resale Service (Section 63.18(e)(3))					
Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))					
Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))					
Overseas Cable Construction (Section 63.18(e)(3))					
Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))					
Other (Section 63.18(e)(3))					
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".)					

_	on of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Res	sold Services to
	nts Except Country X) escription does not appear in this box, please go to the end of the form to view it in its entirety.)	
F	Provide International Facilities-Based and Resold Services to All International Points.	
	t request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in ment of how the application qualifies for streamlined processing.	O No
10. If applying for au Attachment 1.	thority to provide switched services over private lines pursuant to Section 63.16, provide the required sho	wing in
Applicant certifies t	hat its responses to questions 11 through 17 are true:	
	s a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign tachment 1 the information and certifications required by Section 63.18(i) through (m).	
	nt seek authority to provide service to any destination described in paragraphs (1) through (4) Yes If yes, list those destinations in Attachment 1 as a response to question 12.	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.	● N	10
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.		
15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
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.	O 1	10
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.	O 1	lo

CERTIFICATION

18. Typed Name of Person Signing (Must be a Corp Larry Levine	oorate Officer)	19. Title of Person President	n Signing			
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: FCC 214 Attachment 1	2: FCC 214 Atta	achment 2	3:			

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