## 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: International Section 214 Authorization – Google North America Inc.

1. Applicant				
N	Name:	Google North America Inc.	Phone Number:	650-253-0000
	OBA Name:		Fax Number:	650-253-0001
S	Street:	1600 Amphitheatre Parkway	E-Mail:	
	City:	Mountain View	State:	CA
	Country:	USA	Zipcode:	94043 –
A	Attention:			

2. Contact					
	Name:	Google Inc.	Phone Number:	202-346-1100	
	Company:		Fax Number:	202-346-1101	
	Street:	25 Massachusetts Avenue NW	E-Mail:	FCCcontact@google.com	
		9th Floor			
	City:	Washington	State:	DC	
	<b>Country:</b>	USA	Zipcode:	20001 –	
	<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	ek all that apply)			
		d Global Facilities—Based Authority	(Section 63.18(e)(1))		
Glo	bal or Limited	d Global Resale Authority (Section	63.18(e)(2))		
Ind	ividual Facilit	ies–Based Service (Section 63.18(e	e)(3))		
Ind	ividual Switch	ned Resale Service (Section 63.18(e	e)(3))		
Ind	ividual Facilit	ies-Based and Resale Service (Sec	tion 63.18(e)(3))		
Swi	Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))				
Inm	narsat and Mo	bile Satellite Service (Section 63.18	8(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))				

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):
G Other(piease 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 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.)
Application of Google North America Inc. for Authority to Provide International Resold Services to All 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.

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 Kenneth Yi	e a Corporate Officer)	19. Title of Person Signing Chief Executive Officer, President and Secretary			
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: Attachment 1	2: Attachment 2	2 3:			

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