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: Mach Communications LLC International Section 214 Application

1. Applicant			
Name:	Mach Communications LLC	Phone Number:	503-750-5681
DBA Name:		Fax Number:	
Street:	Box 9134	E–Mail:	jwinters@machfm.com
City:	Portland	State:	OR
Country:	USA	Zipcode:	97220 –
Attention	Mr Jaymes Winters 5681		

2. Contact					
	Name:	Lance J.M. Steinhart	Phone Number:	770–232–9200	
	Company:	Lance J.M. Steinhart, P.C.	Fax Number:		
	Street:	1725 Windward Concourse	E-Mail:	info@telecomcounsel.com	
		Suite 150			
	City:	Alpharetta	State:	GA	
	Country:	USA	Zipcode:	30005 –	
	Attention:		Relationship:	Legal Counsel	
3. Place of I	ncorporation	n of Applicant Oregon			
4. Other Co	mpany(ies) a	and Place(s) of Incorporation			
5. Service T	ype(s) (chec	k all that apply)			
★ Glob	al or Limited	l Global Facilities-Based Authorit	y (Section 63.18(e)(1))		
★ Glob	al or Limited	d Global Resale Authority (Section	n 63.18(e)(2))		
Indiv	idual Faciliti	ies-Based Service (Section 63.18(e)(3))		
Indiv	Individual Switched Resale Service (Section 63.18(e)(3))				
Indiv	Individual Facilities–Based and Resale Service (Section 63.18(e)(3))				
Swite	Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))				
Inma	Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))				
Over	Overseas Cable Construction (Section 63.18(e)(3))				
Indiv	Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))				
Othe	Other (Section 63.18(e)(3))				

	itted with this application?
🕶	lete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
Government	al Entity Noncommercial educational licensee
Other(please	explain):
6b. Fee Classifica	ation CUT – Section 214 Authority
7. Destination Co "Countries X, Y,	ountry(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	ription of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to Points Except Country X) te 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 and Resold Services to All International Points.
Attachment 1 a s	icant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Statement of how the application qualifies for streamlined processing. Or 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 Jaymes Winters	e a Corporate Officer)	19. Title of Person Signing CEO		
(U.S. Code, Title 18, S	ection 1001), AND/OR REV	ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT OCATION OF ANY STATION AUTHORIZATION FORFEITURE (U.S. Code, Title 47, Section 503).		
20. 1: Streamline	2: Ownership	3:		

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