## INTERNATIONAL SECTION 214 SPECIAL TEMPORARY AUTHORITY APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu: Application for additional 60–day Extension of Special Temporary Authority to offer the Inmarsat BGAN service.

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<b>Country:</b>	USA	Zipcode:	20004 –
<b>Contact Title</b>	:	<b>Relationship:</b>	Legal Counsel
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TYPE OF REQUEST	
6. • New Request • Extend STA Date • Other	7. Date Authorization Needed:02/19/2007
<ul><li>8. Is a fee submitted with this application?</li><li>If Yes, complete and attach FCC Form 159. If No, indicate r</li></ul>	reason for fee exemption (see 47 C.F.R.Section 1.1114).
Governmental Entity Noncommercial educational licens	
• Other(please explain):	
<ul><li>9. Description of Special Temporary Authority Requested.</li><li>(If the complete description does not appear in this box, please g</li></ul>	go to the end of the form to view it in its entirety.)
Application for additional 60- Authority to offer the Inmarsa	-day Extension of Special Temporary at BGAN service.
10. In Attachment 1, provide justification of need for special ten	nporary authority requested.
	with any pending applications filed with the Commission, enter either the file n ID of the pending application [e.g., IB200311111] AND go to question 16.)
Applicant certifies that its responses to questions 11 throug	gh 17 are true:
12. If the applicant is a foreign carrier, or is affiliated (as define the information and certifications required by Section 63.18(i)	ed in 47 C.F.R. Section 63.09(e)) with a foreign carrier, provide in Attachment 1 through (m).

13. 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	O No
14. 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.	• Yes	O No
15. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applic direct and indirect shareholders or other equity holders, and identify any interlocking directorates.	ant's ten pero	cent or greater
16. In Attachment 1, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
17. 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	O No
18. 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	O No

CERTIFICATION

19. Typed Name of Person Signing Eric Verheylewegen		20. Title of Person Signing Authorized Representative	
(U.S. Code, Title 18, S	ection 1001), AND/OR REVO	ARE PUNISHABLE BY FINE AND / OR IMPRISONME OCATION OF ANY STATION AUTHORIZATION FORFEITURE (U.S. Code, Title 47, Section 503).	ENT
21. 1: Attachment 1	2:	3:	

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