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: Request Special Temporary Authority to provide notice of non–substantial pro forma transfer of control transaction.

1. Applicant			
Name:	THRANE & THRANE AIRTIME LTD.	Phone Number:	757–463–9557
DBA Name:		Fax Number:	757–463–9581
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	SUITES K, L & M		
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Country:	USA	Zipcode:	23452 –
Attention:	Tom Kelly		

Name:	Eric Fishman, Esq.	Phone Number:	212-513-3268
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Street:	195 Broadway	E-Mail:	eric.fishman@hklaw.com
	24th Floor		
City:	New York	State:	NY
Country:	USA	Zipcode:	10007 —
Contact Title:	Eric Fishman	Relationship:	Legal Counsel
vice Type(s) (check	all that apply)	v (Section 63 18(e)(1))	
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TYPE OF REQUES	T			
6. 👩 New Request	Extend STA Date	• Other	7. Date Authorization Needed: 12/10/2008	
			•	
	tted with this application? nd attach FCC Form 159. If 1	No, indicate reason f	or fee exemption (see 47 C.F.R.Section 1.1114).	
O Governmental En	tity O Noncommercial educ	cational licensee		
• Other(please expl	ain):			
	ial Temporary Authority Rec iption does not appear in this		e end of the form to view it in its entirety.)	
			y to provide notice of non- control transaction.	
10. In Attachment 1, p	provide justification of need f	for special temporary	authority requested.	
number [e.g., ITC-21		B Submission ID of	ny pending applications filed with the Commission, of the pending application [e.g., IB200311111] AND g	
Applicant certifies the	hat its responses to questio	ons 11 through 17 a	re true:	
	s a foreign carrier, or is affilia certifications required by Sec		C.F.R. Section 63.09(e)) with a foreign carrier, prov	vide in Attachment 1

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.	O Yes	● 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.	O Yes	lo 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 per	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 Svend Age Lundgaard Jensen		20. Title of Person Signing President			
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).					
21. 1: Exhibit 1	2: Exhibit 2	3:			

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