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

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu: Application for extension of Special Temporary Authority to offer the Inmarsat BGAN service

ant			
Name:	THRANE & THRANE AIRTIME LTD.	Phone Number:	757–463–9557
<b>DBA Name:</b>		Fax Number:	757–463–9581
Street:	509 VIKING DRIVE	E-Mail:	TMK@THRANE.COM
	SUITES K, L & M		
City:	VIRGINIA BEACH	State:	VA
<b>Country:</b>	USA	Zipcode:	23452 –
Attention:	Tom Kelly		

2. Contac	et				
	Name:	Eric Fishman, Esq.	Phone Number:	212-513-3268	
	Company:	Holland & Knight LLP	Fax Number:	212-385-9010	
	Street:	195 Broadway	E-Mail:	eric.fishman@hklaw.com	
		24th Floor			
	City:	New York	State:	NY	
	Country:	USA	Zipcode:	10007 –	
	<b>Contact Title:</b>	Eric Fishman	Relationship:	Legal Counsel	
3. Pl	ace of Incorporati	ion of ApplicantDelaware			
	Company(ies) ar	nd Place(s) of Incorporation			
None	T () ( 1 1	11 (1 ( 1 )			
	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))					
		Based Service (Section 63.18(e)			
Individual Switched Resale Service (Section 63.18(e)(3))					
Indiv	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 $63.18(e)(3)$ )					

TYPE OF REQUE	ST		
6. New Reques	st	7. Date Authorization Needed:06/16/2009	
	nitted with this application?		
If Yes, complete	and attach FCC Form 159. If No, indicate rea	ason for fee exemption (see 47 C.F.R.Section 1.1114).	
Governmental Er	ntity Noncommercial educational licensee		
Other(please exp	olain):		
9. Description of Spe	ecial Temporary Authority Requested.		
(If the complete descri	ription does not appear in this box, please go	to the end of the form to view it in its entirety.)	
	Application for extension of Sp Inmarsat BGAN service	pecial Temporary Authority to offer the	
10. In Attachment 1,	provide justification of need for special temporal	orary authority requested.	
number [e.g., ITC-2]		with any pending applications filed with the Commission, enter ID of the pending application [e.g., IB200311111] AND go to	

Applicant certifies that its responses to questions 11 through 17 are true:

12. 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).

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	<b>⊚</b> 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	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.	<b>⊚</b> 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.	<b>⊚</b> Yes	O No

## **CERTIFICATION**

19. Typed Name of Person Signing	20. Title of Per	rson Signing	
Svend Age Lundgaard Jensen	President		
	E ON THIS FORM ARE PUNISHA 001), AND/OR REVOCATION OF A 312(a)(1)), AND/OR FORFEITURE	ANY STATION AUTHORIZAT	ION
21. 1: Attachment A	2:	3:	

## FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Fede ral Communications Commission, AMD–PERM, Paperwork Reduction Project (3060–0686), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060–0686.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104–13, OCTOBER 1, 1 995, 44 U.S.C. SECTION 3507.