CABLE LANDING LICENSE APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

1

Enter a description of this application to identify it on the main menu:

FLAG NGN (Pacific) Cable Landing License Application

1. Applicant								
	Name:	FLAG Telecom Network USA Limited	Phone Number:	212-319-3755				
	DBA Name:		Fax Number:					
	Street:	Corporate Trust Centre	E-Mail:					
		1209 Orange Street						
	City:	Wilmington	State:	DE				
	Country:	USA	Zipcode:	19801 –				
	Attention:	Mr. Michael Sauer						

	Name:	Phil Marchesiello	Phone Number:	202-887-4348
	Company:	Akin Gump Strauss Hauer & Feld LLP	Fax Number:	202–955–7611
	Street:	1333 New Hampshire Ave., NW	E-Mail:	pmarchesiello@akingump.com
	City:	Washington	State:	DC
	Country:	USA	Zipcode:	20036 –
Attention:		Relationship:	Legal Counsel	
	-	on of Applicant Delaware and Place(s) of Incorporation		
Other	-	and Place(s) of Incorporation		
Other Destin Captio	Company(ies) a nation Country on (description between the Ur	and Place(s) of Incorporation (ies) Japan	ry B.)	nd and Operate a Fiber Optic Submarine Cable rm to view it in its entirety.)

7. Is a fee submitted with this application?

⑥ If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).

O Governmental Entity O Noncommercial educational licensee

• Other(please explain):

8. Will the cable system be operated on a common carrier basis? \bigcirc Yes \bigcirc No

If yes, provide the File Number of the associated Section 214 application for the construction and operation of new facilities.

9. In Attachment 1, provide the information and certifications required by 47 C.F.R. Section 1.767(a).

CERTIFICATIONS

10. 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.								
11. Typed Name of Person Signing	12. Title of Person Signin	12. Title of Person Signing						
Michael Sauer	Director	-						
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).								
13. 1: Attachment 1	2: 3:							

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