

CABLE LANDING LICENSE APPLICATION  
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APPLICANT INFORMATION

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

Submarine Cable Landing License Application

1. Applicant			
<b>Name:</b>	Office des postes et Telecommunications de Polynesie francaise	<b>Phone Number:</b>	689 41 45 00
<b>DBA Name:</b>		<b>Fax Number:</b>	689 41 75 75
<b>Street:</b>	BP 605	<b>E-Mail:</b>	Maui_Sanford@opt.pf
<b>City:</b>	PAPEETE	<b>State:</b>	
<b>Country:</b>	French Polynesia	<b>Zipcode:</b>	-
<b>Attention:</b>	Maui Sanford		

2. Contact

<b>Name:</b>	Eric Fishman	<b>Phone Number:</b>	(212) 513-3268
<b>Company:</b>	Holland & Knight LLP	<b>Fax Number:</b>	(212) 385-9010
<b>Street:</b>	195 Broadway 24th Floor	<b>E-Mail:</b>	eric.fishman@hklaw.com
<b>City:</b>	New York	<b>State:</b>	NY
<b>Country:</b>	USA	<b>Zipcode:</b>	10007 -
<b>Attention:</b>	Eric Fishman, Esq.	<b>Relationship:</b>	Legal Counsel

**3. Place of Incorporation of Applicant** French Polynesia

4. Other Company(ies) and Place(s) of Incorporation  
None

**5. Destination Country(ies)** French Polynesia

**6. Caption (description of authority requested, e.g., Application for a License to Land and Operate a Fiber Optic Submarine Cable System between the United States, Country A and Country B.)**

(If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

Application for a License to Land and Operate a Fiber Optic Submarine Cable System between the United States and French Polynesia

7. Is a fee submitted with this application?  
 If Yes, complete and attach FCC Form 159. **If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).**  
 Governmental Entity    Noncommercial educational licensee  
 Other (please explain):

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

<b>11. Typed Name of Person Signing</b> Moana Tatarata	<b>12. Title of Person Signing</b> Chairman of the Board
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(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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