

CABLE LANDING LICENSE APPLICATION  
FCC FORM 220  
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APPLICANT INFORMATION

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

2009 Kodiak-Kenai Cable Company, LLC-Application for non-common carrier submarine cable license-Streamlined Processing Requested

1. Applicant

<b>Name:</b>	Kodiak-Kenai Cable Company, LLC	<b>Phone Number:</b>	907-278-6100
<b>DBA Name:</b>		<b>Fax Number:</b>	907-222-2760
<b>Street:</b>	2702 Denali Street Suite 100	<b>E-Mail:</b>	webell@oldharbor.org
<b>City:</b>	Anchorage	<b>State:</b>	AK
<b>Country:</b>	USA	<b>Zipcode:</b>	99503 -
<b>Attention:</b>	Mr C. Walter Ebell		

2. Contact

<b>Name:</b>	Mark D. Schneider	<b>Phone Number:</b>	202-736-8058
<b>Company:</b>	Sidley Austin LLP	<b>Fax Number:</b>	202-736-9711
<b>Street:</b>	1501 K Street NW	<b>E-Mail:</b>	mschneider@sidley.com
<b>City:</b>	Washington	<b>State:</b>	DC
<b>Country:</b>	USA	<b>Zipcode:</b>	20005 -
<b>Attention:</b>	Mark D. Schneider	<b>Relationship:</b>	Legal Counsel

3. Place of Incorporation of Applicant Alaska

4. Other Company(ies) and Place(s) of Incorporation  
Old Harbor Native Corporation, Alaska  
Ouzinkie Native Corporation, Alaska

5. Destination Country(ies) United States-Alaska

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 within the State of Alaska

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> C. Walter Ebell	<b>12. Title of Person Signing</b> Chief Executive Officer
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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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