# CABLE LANDING LICENSE APPLICATION FCC FORM 220 FOR OFFICIAL USE ONLY

# APPLICANT INFORMATION

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

TERRA-Aleutian SCL Application

1. Applicat	nt			
	Name:	GCI Communication Corp.	Phone Number:	202-457-8815
	DBA Name:		Fax Number:	
	Street:	2550 Denali St, Ste 1000	E-Mail:	cnierman@gci.com
	City:	Anchorage	State:	AK
	Country:	USA	Zipcode:	99503 – 2737
	Attention:	Christopher Nierman		

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7.	Contact	ľ

Name: Kent D. Bressie Phone Number: 202–730–1337

**Company:** Harris, Wiltshire & Grannis LLP **Fax Number:** 

Street: 1919 M Street, N.W. E-Mail: kbressie@hwglaw.com

Suite 800

City: Washington State: DC

**Country:** USA **Zipcode:** 20036 – 3537

Attention: Relationship: Legal Counsel

### 3. Place of Incorporation of Applicant Delaware

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

- **5. Destination Country(ies)** none—system is domestic
- 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 Private Fiber-Optic Submarine Cable System Connecting Akutan, Dutch Harbor, False Pass, Levelock, and Port Heiden, Alaska, the TERRA-Aleutian Cable System

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 of	carrier basis? Yes	s 🔊 No								
If yes, provide the File Number of the associated Sec	ction 214 application	for the construction and	l operation of new fa	cilities.						
9. In Attachment 1, provide the information and cer	tifications required by	47 C.F.R. Section 1.76	57(a).							
CERTIFICATIONS										
10. By checking Yes, the undersigned certifies that it to a denial of Federal benefits that includes FCC be 21 U.S.C. Section 862, because of a conviction for 1.2002(b) for the meaning of "party to the approximately appro	nefits pursuant to Sect possession or distribut	tion 5301 of the Anti–Dation of a controlled subs	Orug Act of 1988,	Yes     No						
11. Typed Name of Person Signing Christopher Nierman	12. Title of Person Signing Senior Counsel, Federal Affairs									
WILLFUL FALSE STATEMENTS MAI (U.S. Code, Title 18, Section 1 (U.S. Code, Title 47, Section 2	001), AND/OR REVO	OCATION OF ANY ST	TATION AUTHORIZ	ZATION						
13. 1: Attachment	2:		3:							

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