

CABLE LANDING LICENSE APPLICATION
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APPLICANT INFORMATION

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

FLAG Application for Transfer of Control

1. Applicant

| | | | |
|-------------------|--------------------------------|----------------------|-----------------------------|
| Name: | FLAG Telecom Group Limited | Phone Number: | 442074789540 |
| DBA Name: | | Fax Number: | 442073170808 |
| Street: | Milner House, 18 Parliament St | E-Mail: | gmacpherson@flagtelecom.com |
| | Hamilton | | |
| City: | | State: | |
| Country: | Bermuda | Zipcode: | - |
| Attention: | Grant Macpherson | | |

2. Contact

| | | | |
|-------------------|-------------------------------------|----------------------|----------------------------|
| Name: | Phillip R. Marchesiello | Phone Number: | 2028874348 |
| Company: | Akin Gump Strauss Hauer & Feld, LLP | Fax Number: | 2029557611 |
| Street: | 1333 New Hampshire Ave., NW | E-Mail: | pmarchesiello@akingump.com |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 – 1564 |
| Attention: | | Relationship: | Legal Counsel |

3. Place of Incorporation of Applicant Bermuda

4. Other Company(ies) and Place(s) of Incorporation
Reliance Communications Ventures Limited, incorporated in India
Reliance Industries Limited, incorporated in India

5. Destination Country(ies) United Kingdom, France

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 Pursuant to the Cable Landing License Act for Consent to Transfer of Control of Submarine Cable Landing License SCL-LIC-19990301-00005.

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

| | |
|---|---|
| 11. Typed Name of Person Signing Grant Macpherson | 12. Title of Person Signing General Counsel |
|---|---|

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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