

Class Licence(s) Application Form for Ship Station Radio Licence

Under section 32 of the Telecommunications Act No 31 of 2000

Grenada

Name of Applicant: _____

Type of Application: New Application
 Application to Modify/Amend an Existing Licence
 Application to Renew Licence

Please tick (✓) the licence that is being applied for:

 Ship Station Radio Licence

National Telecommunications Regulatory Commission

Maurice Bishop Highway
Grand Anse
P.O Box 854
St. George's
Grenada

Telephone Number: 1-473-435-6872

Fax Number: 1-473-435 2132

Email: gntrc@ectel.int

Website: www.ntrc.gd

Guidance Notes

- This application form can be used for first issue and renewal of licences.
- Three (3) copies of the completed application form should be submitted in an envelope clearly marked “Telecommunications Class Licence Application” addressed to the Secretary, National Telecommunications Regulatory Commission, Maurice Bishop Highway, Grand Anse, P.O Box 854, St. George’s, Grenada.
- The completed application form must be accompanied by a fee of Two Hundred Eastern Caribbean Dollars (EC\$200.00), per licence, payable to the National Telecommunications Regulatory Commission, Grenada.
- For questions or sections that are not applicable, write “NOT APPLICABLE” in bold or in print.
- For renewal of licence(s), please attach the following documents to the completed application form:

A copy of the present or existing

- ✓ Ship Station Radio License,
- ✓ Equipment Installation Certificate
- ✓ Radio Operator’s Certificate
- ✓ Ship’s Registration Certificate issued by the Registrar of Ships.

1. PART I – SHIP DETAILS

1.1 Name of ship/vessel: _____

1.2 Country of Registration: _____

1.3 Name of the owner: _____

1.4 Address of owner: _____

Home/Business Address

Postal Address

1.5 Name of Agent: _____

1.6 Address of the Agent: _____

Home/Business Address

Postal Address

1.7 Name of Accounting Authority: _____

1.8 Address of Accounting Authority: _____

Home/Business Address

Postal Address

1.9 Accounting Authority Identification Code: _____

1.10 Class of Ship/Vessel: _____

1.11 Gross Tonnage: _____

1.12 Size of Ship/Vessel: _____

1.13 Distance of operation from nearest land mass: _____

2 PART II – DETAILS OF PRESENT SHIP STATION LICENCE

(Photocopy of the ship station license should be attached)

1. Call Sign: _____

2. MMSI/DSC Number: _____

3. Inmarsat ID: _____

4. Country of Issue: _____

5. Country of Registration: _____

6. Period of Validity: _____

7. Public Correspondence Category: _____

8. Supplemental Information:

2.9 Details of Radio Operator's Certificates

3 PART III – EQUIPMENT INSTALLATION

(Certified copy of the installation certificate should be attached)

EQUIPMENT TYPE	MAKE & MODEL	Tx POWER (watts)	CLASS OF EMISSION	FREQUENCY BANDS
<i>MF/HF</i>				
MF/HF DSC				
VHF				
VHF DSC				
HAND VHF				
INMARSAT				
E.P.I.R.B				
RADAR				
SART				
EGC				
WATCH Rx				
GPS				
DIRECTON FINDER				
NAVTEX				
<i>SATNAV</i>				
OTHER				

PART IV - DECLARATION¹

(Delete the option that does NOT apply)

On behalf of the applicant, I / I declare that the information provided is accurate and complete in all respects.

Signed: _____

Full name of signatory: _____

Position held: _____

Date: _____

¹This declaration must be signed:

- (a) in the case of an **individual**, by the person in whose name the application is made;
- (b) in the case of a **sole proprietorship**, by the sole proprietor, or
- © in the case of a **partnership**, by a partner; or
- (d) in the case of a **company or other body corporate**, by a director, company secretary or other authorised officer.