



- Three (3) copies of the completed application form should be submitted in an envelope clearly marked “Telecommunications Class Licence Application” addressed to the Secretary of the 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 Twenty-five Eastern Caribbean Dollars (EC\$ 25.00), per licence, payable to the National Telecommunications Regulatory Commission, Grenada.
- For renewal of licence(s), please attach a copy of the present or existing licence to completed application form.
  - ✓ Two (2) passport-sized photographs should be attached.
  - ✓ Documentary proof that applicant has passed the Radio Amateur Examination must be enclosed.
- For questions or sections that are not applicable, write “NOT APPLICABLE” in bold or in print.
- Please note that any word, phrase or expression used herein shall have the same meaning as it has in the Telecommunications Act No.31 of 2000
- Applications should include schematic of the network where applicable
- Copies of technical details of equipment and approval certificates may be requested. (Photocopies of technical specifications of equipment should be attached)

**PART 1 – The Applicant**

(Please complete fully in type or block letters)

**1.1 Contact Details**

1.1.1 Name of applicant: \_\_\_\_\_

1.1.2 Address of applicant:

**Home/Business Address**

**Postal Address**

3. Telephone number: \_\_\_\_\_

4. Fax Number: \_\_\_\_\_

5. Email address: \_\_\_\_\_

6. Date of Birth: \_\_\_\_\_ Age on last birthday: \_\_\_\_\_

7. Nationality \_\_\_\_\_

8. Registration Number of Identification Card (if applying for a renewal):  
\_\_\_\_\_

9. Passport Number: \_\_\_\_\_

10. Occupation: \_\_\_\_\_

**2 PART II - Licence Details**

1. Select as appropriate

New Licence  
Renewal  
Visitor

Equipment Upgrade/Replacement  
Class Upgrade

2. Licence No.<sup>1</sup> \_\_\_\_\_

3. Handle/Call Sign<sup>2</sup> \_\_\_\_\_

4. Place of Issue: \_\_\_\_\_

5. Date of Issue: \_\_\_\_\_

<sup>1</sup> For Renewal of licence

<sup>2</sup> For Renewal of licence

**3 PART III – Technical Details**

3.1 Do you own or have in your possession telecommunications equipment to engage in amateur radio operations and/or citizen band radio operations?

**YES**

**NO**

If YES, answer all sections within this Part. If NO, go to Part IV.

3.2 Details of Communication Equipment:  
**(please attach copies of technical specifications of equipment)**

**1. MOBILE**

(In the event that you have more than 4 (four) mobile radios please photocopy this table or request a copy from NTRC to include the additional radios.)

	1	2	3	4
Transmit Power (W)				
Band width (MHz)				
Antenna Gain (dBi)				
Polarization				
Bands to be used				
Radio Make and Model				
TX Low Frequency Limit				
TX High Frequency Limit				
RX Low Frequency Limit				
RX High Frequency Limit				

Ant. Make and Model				
Ant. EIRP (dBm)				
Ant. Low limit Frequency				
Ant. High limit Frequency				
Ant. Type				
Ant. Gain (dBi)				
Polarization				

### 3.2.2 BASE/FIXED STATIONS AND REPEATERS (If Applicable)

#### 3.2.2.1 Site

(Indicate at the top of the columns whether the data refers to a Base station or a Repeater)

Base Station or Repeater	1	2	3	4
Station Name/Location				
Longitude				
Latitude				

#### 3.2.2.2 Antenna

Ant. Make and Model				
Ant. EIRP (dBm)				
Ant. Low limit Frequency				
Ant. High limit Frequency				
Ant. Type				
Ant. Gain (dBi)				
Polarization				

#### 3.2.2.3 Equipment

(Indicate at the top of each column base station or repeater as appropriate)

Base Station/Repeater				
Make and Model				
TX Low Frequency Limit				
TX High Frequency Limit				
RX Low Frequency Limit				
RX High Frequency Limit				

**3.2.2.4 Station**

**(Indicate at top of column “base station or repeater”)**

Base Station/Repeater				
Station ERP				
Station TX Power				
Stations Antenna height				
Band width Frequency				
Number of Channels				

**3.3 Additional Equipment and Supplementary Information**

Details of additional equipment, especially, custom-built equipment and their purpose of use:

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**Note: For custom-built equipment, photographs may be requested.**

Please furnish any other details and supplementary information:

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**PART IV - DECLARATION<sup>3</sup>**

*(Delete the option that does NOT apply)*

(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:** \_\_\_\_\_

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**FOR OFFICIAL USE ONLY:**

*Examination Required:*

**YES**

**NO**

*Examination Details (If Applicable)*

Call Sign Issued:	Date:
Signed:	
Name Authorising Officer:	

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<sup>3</sup>This 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
- (c) 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 authorized officer signed