

CLASS LICENCE(S) APPLICATION FORM

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:

Broadcast AM Radio Station

Broadcast FM Radio Station

Broadcast Television Station

Community FM Radio Station

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

1. This application form can be used for first issue and renewal of licences.
2. Three (3) copies of the completed application form should be submitted in an envelope clearly marked "Radio/Television Broadcast Class Licence Application" addressed to the Secretary, National Telecommunications Regulatory Commission, Maurice Bishop Highway, Grand Anse, P.O Box 854, St. George's, Grenada.
3. The completed application form must be accompanied by a fee of Five Hundred Eastern Caribbean dollars (EC\$500.00) excluding application for Community FM Radio Station which is One Hundred Eastern Caribbean dollars (\$100.00), per licence, payable to the National Telecommunications Regulatory Commission, Grenada.
4. A complete application form must be accompanied with a Business plan.
5. For renewal or modification of licence(s), please attach a copy of the present or existing licence to completed application form.
6. For questions or sections that are not applicable, write "NOT APPLICABLE" in bold or in print.
7. Copies of the technical specifications of the equipment must be furnished.
8. Please note that any word, phrase or expression used herein shall have the same meaning as it has in the Telecommunications Act CAP. 315C.

PART 1 – THE APPLICANT

(Please complete fully in type or block letters)

1.1 Contact Details

1.1.1 Name of Applicant: _____

Contact Person: _____

1.1.2 Address of Applicant: _____

Business Address

1.1.3 Telephone Number: _____

1.1.4 Fax Number: _____

1.1.5 Email: _____ Website: _____

1.1.6 Company Registration No: _____

1.1.7 Occupation: _____

1.1.8 Nationality: _____ National ID/Passport No: _____

PART II – LICENCE DETAILS

2.1 Select as appropriate

New Licence

Modification/Amendment

Renewal

2.2 Licence No. _____

(For Renewal, Amendment or Modification of licence.)

2.3 Place of Issue: _____

2.4 Date of Issue: _____

2.5 Station Identifier. _____ (Optional,
applicants for Radio broadcast may wish to include the station identifier.

PART III – TECHNICAL DETAILS

3.1 Details of Equipment: (for AM Radio, FM Radio and Terrestrial Television Broadcast)

Proposed AM/FM Frequency or TV Channel: _____

3.1.1 TRANSMIT STATION

If there are more than three (3) transmit stations the table should be copied and completed with the information relating to the other transmit station(s).

	1	2	3
Transmitter Site Location			
Longitude			
Latitude			
Transmit Power (W)			
Band width (MHz)			
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			
Antenna Low limit Frequency			
Antenna High limit Frequency			
Antenna Type			
Antenna Gain (dBi)			
Polarization			
Antenna height (M)			

3.1.2 Studio to Transmitter Link (STL) / Outside Broadcast (OBS)

(Indicate at the top of the columns whether the data refers to a STL or an OBS.)

	1	2	3
Station Type (STL or OBS)			
Station Name/Location			
Longitude			
Latitude			
Antenna Make and Model			
Antenna EIRP (dBm)			
Antenna Low limit Frequency			
Antenna High limit Frequency			
Antenna Type			
Antenna Gain (dBi)			
Polarisation			
Equipment			
Equipment Make and Model			
Equipment TX Low Frequency Limit			
Equipment TX High Frequency Limit			
Equipment RX Low Frequency Limit			
Equipment RX High Frequency Limit			
Station			
Station ERP			
Station TX Power			
Stations Antenna height			
Band width Frequency			
Number of Channels			

3.2 Details of Equipment: (Television)

3.2.1 VIDEO OUTPUT

Channel Bandwidth	
Channel Configuration	
Minimum signal level at TV input	
Minimum Carrier/Noise	
Visual carrier frequency	
Aural frequency deviation	
Signal to inter-modulation ratio	
Radiation level	
Line amplifier voltage	
Permissible variation of visual carrier level	
(a) Over 24 Hours	
(b) Between two adjacent channels	
(c) Between any two channels	
(d) Frequency response (each channel)	

PART IV – DECLARATION³

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

Signed _____

Full name of signatory:

Position held:

Date: _____
(day / month / year)