

- 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 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 Two Hundred Eastern Caribbean Dollars (EC\$200.00), 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.
- For questions or sections that are not applicable, write “NOT APPLICABLE” in bold or in print.
- Please indicate which, if any, information provided by the applicant in this application is confidential.
- 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)

1. **PART 1 – The Applicant**
(Please complete fully in type or block letters)

1.1 **Contact Details**

1. Name and address of applicant _____

2. Address of Applicant:

Business/Home Address

Postal Address:

3. Licence No: _____

1.1.4 Designated contact person: _____

1.1.5 Telephone number: _____

1.1.6 Fax Number: _____

1.1.7 Email address: _____

1.1.8 Website: _____

1.1.9 State whether the licence is required for a (registered) business:

YES NO

If YES answer (a) and (b) below if NO proceed to question 1.1.10

(a) State whether the applicant is a company, partnership, sole proprietorship

(b) Business's registration number. *(Please supply a copy of the Business Registration Certificate and/or Certificate of Incorporation):*

1.1.10 If a licence is being applied for personal use, please answer the following questions:

Date of Birth: _____ Age on last birthday: _____

Nationality _____

Registration Number of Identification Card: _____

Passport Number: _____

Occupation: _____

2 PART II - Licence Details

2.1 Select as appropriate

New Licence

Equipment Upgrade/Replacement

Renewal

2.2 Licence No.¹ _____

2.3 Place of Issue: _____

2.4 Date of Issue: _____

3. PART III – Technical Details

3.1 Frequency Band: -

LF - Low Frequency

VHF - Very High Frequency

MF - Medium Frequency

UHF - Ultra High Frequency

HF - High Frequency

SHF - Super High Frequency

EHF - Extra High Frequency

3.2 Class of Station: -

Aeronautical Mobile Radio

Land Mobile Radio

Maritime Mobile Radio

3. Details of Communication Equipment:

3.1. 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 | | | | |
| No: of channels (indicate simplex or duplex) | | | | |

| | | | | |
|-------------------------|--|--|--|--|
| General Area of Use | | | | |
| 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 | | | | |

3.3.2 BASE/FIXED STATIONS AND REPEATERS (If Applicable)

3.3.2.1 Site

(Indicate at top of columns Base station or Repeater)

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

3.3.2.2 Antenna

(Indicate at top of columns Base station or Repeater)

| | | | | |
|--------------------------|--|--|--|--|
| Base Station/Repeater | | | | |
| Ant. Make and Model | | | | |
| Ant. EIRP (dBm) | | | | |
| Ant. Low limit Frequency | | | | |

| | | | | |
|---------------------------|--|--|--|--|
| Ant. High limit Frequency | | | | |
| Ant. Type | | | | |
| Ant. Gain (dBi) | | | | |
| Polarization | | | | |

3.3.2.3 Equipment

(Indicate at top of columns Base station or Repeater)

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

3.3.2.4 Station

(Indicate at top of columns Base station or Repeater)

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

3.4 Frequencies requested

Specific Frequency/Frequencies Required: _____

Nature of Service: _____

Number of Channels Required: - Simplex _____ Repeater _____

Voice: - _____ VFT²: - _____ Data: - _____ Others: - _____

Details of Communication Points:-

(If this space is not sufficient, please use extra paper to indicate the stations)

| Type of Station | Location of Station or/Registration No. of Vehicle/Boat/Aircraft | Number of Units | Call Sign |
|---------------------|---|--------------------|-----------|
| Base/Fixed | | | |
| Mobile | | | |
| Portable/Handheld | | | |
| Repeater | | | |
| Any Other Equipment | | | |

Name and address of the manufacture of Equipment:-

PART IV - DECLARATION¹

(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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² VFT-Voice Frequency Telegraphy

³This 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.