

Form 3

Class Licence(s) Application Form – Type B Service
Under section 31 of the Telecommunications Act 2001

Saint Vincent and the Grenadines

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:

- Family Radio Service Licence

**National Telecommunications Regulatory Commission
Kingstown**

Saint Vincent and the Grenadines

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, Kingstown, Saint Vincent and the Grenadines.

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, Kingstown, Saint Vincent and the Grenadines.

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.

- Photocopies of the technical specifications of the equipment must be furnished.
- Please note that any word, phrase or expression used herein shall have the same meaning as it has in the Telecommunications Act 2001.

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

1.1 **Contact Details**

Name of applicant: _____

1.1.1 Address of applicant:

Home/Business Address

Postal Address

1.1.2 Telephone number: _____

1.1.3 Fax Number: _____

1.1.4 Email address: _____

1.1.5 Date of Birth: _____ Age on last birthday: _____

1.1.6 Nationality _____

1.1.7 Registration Number of Identification Card: _____

1.1.8 Passport Number: _____

1.1.9 Occupation: _____

| Make | Model | Serial No | Type Approval | |
|------|-------|-----------|---------------|--------------|
| | | | Agency | Reference No |
| | | | | |
| | | | | |
| | | | | |

1.1.10 Number of FRS units: _____

1.1.11 Frequencies and/or number of channels on each unit: _____

1.1.12 Purpose for which the units will be used:

2 PART II – Technical Details

2.1 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 III.

2.2 Details of Communication Equipment:

2.2.1 MOBILE

| | 1 | 2 | 3 | 4 |
|--|---|---|---|---|
| Transmit Power (dBm) | | | | |
| Band width (MHz) | | | | |
| Antenna Gain (dBi) | | | | |
| Polarization | | | | |
| No: of channels (indicate simplex or duplex) | | | | |
| General Area of Use | | | | |

PART III - 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:- _____

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.