

APPLICATION FOR TYPE APPROVAL
(For Telecommunications Terminal Equipment).

CONTACT INFORMATION

Name of Applicant (or Authorised Representative)	
Last Name	Other Names

ORGANISATION/COMPANY

Registered Name of Company		
Address		
Telephone	Telefax	Email

INCORPORATION (ATTACH PHOTOCOPY OF CERTIFICATE)

Registration No	Date of Incorporation	
Names of Directors	Address	Nationality
Names of Shareholders	Address	Nationality
<p>Have you attached</p> <p>1. Photocopy of Incorporation? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>2. Certified true copy of memorandum and Articles of Association? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>3. Tax Clearance Certificate? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>4. Any other relevant document? Yes <input type="checkbox"/> No <input type="checkbox"/></p>		
*Attach copies of licence(s) you currently hold		

EQUIPMENT DESCRIPTION, STANDARDS AND SPECIFICATIONS

Technical name of equipment

Purpose of equipment in a network		
i. Manufacturer's/Trade name: _____ ii. Type: _____ iii. Model: _____ iv. Country of Manufacture/assembly: _____ v. Year of Manufacture: _____ vi. RF Channel spacing _____ vii. _____ viii. _____ ix. _____ x. Operating frequency range _____		
Any certificates [e.g. Test report, standards] received? Yes No		
If yes, then complete the section below		
Certificate No	Issuing Authority	Relevant Standard
Fees payable on Application		
<i>An application fee of \$25 is payable on submission of a completed application form. The application fee is to be paid through a certified cheque payable to the National Telecommunications Commission.</i>		
Have you included payment with your application form? Yes No		
If you have paid the application fee separately, state your receipt number and date of payment		
Receipt No _____ Date _____		

UNDERTAKING

I/We _____ hereby certify that, to the best of my/our knowledge, the information contained in this application form is true in all respects and I/We hereby give an undertaking that, upon a grant of a type approval, I/We shall abide by the Regulations, the guidelines and any terms and conditions upon which the type approval is granted. I/We accept that the type approval may be revoked and the appropriate penalty applied if it is established that I/We have been granted the type approval based on incorrect information.	
Applicant Full Name	
Signature	Date