



**APPLICATION FOR POINT TO POINT RADIO COMMUNICATION
SPECTRUM LICENCE**

PART 1

All sections must be completed

GENERAL INFORMATION (APPLICANT DETAILS)

1. Full name of the company, firm or person in whose name the licence is sought.			
2. Business Address			
3. Contact Name			
4. Telephone	5. Fax No.	6. Email	
7. Address to which the licence is to be sent, if different from the address given above			

BUSINESS DETAILS

1. Registered name of company/firm		
2. Company trade name (if different from above)		
3. For a Limited Company, registered number in the Company's Registration Office		
4. Name(s) of owner(s), partner(s) or Director		

EQUIPMENT SUPPLIER DETAILS

1. Company Name			
2. Contact Name			
3. Address			
4. Telephone	5. Fax No.	6. Email	

GENERAL LINK DETAILS

1. Type of Application	New <input type="checkbox"/>	Amendment <input type="checkbox"/>	Replacement <input type="checkbox"/>
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2. Please state the quantity of point to point links being applied for			
3. Details of existing licences (if applicable)			
4. If an amendment to an existing licence is requested, please state the details of amendment			
5. Please indicate the type of transmission to be used		Voice <input type="checkbox"/>	Voice and Data <input type="checkbox"/> Data <input type="checkbox"/> Video <input type="checkbox"/>

PART 2

EQUIPMENT IN THE SYSTEM (TECHNICAL DETAILS) Separate sheets of paper should be used for each site

1. Address of transmitting site			
2. Geographical co-ordinates of transmitting site	Longitude	<input type="text"/> <input type="text"/> W	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	Latitude	<input type="text"/> <input type="text"/> N	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3. Equipment Manufacturer			
4. Equipment Model			
5. Maximum Transmit Power			
6. Frequency Band			
7. Equipment Standard (ETSI etc)			
8. Equipment Emission Designation			
9. Antenna Manufacturer			
10. Antenna Model			
11. Maximum Gain (dBi)			
12. Polarization of antenna	Vertical <input type="checkbox"/>	Horizontal <input type="checkbox"/>	Circular <input type="checkbox"/>
13. Antenna Height (m)	Above ground level <input type="checkbox"/>	Above sea level <input type="checkbox"/>	