



APPLICATION TO INSTALL AIRCRAFT

Registered Co. Government Private Military

*Fields that are mandatory are indicated by an *. Application form must be completed as thoroughly as possible.*

*Name: _____

*Street Address: _____ P.O. Box: _____ *Tel: _____

*City/Town/District: _____

*Name of Responsible Person: _____

*Purpose of Radio Network: _____

Date of Previous Permit: _____

Email: _____

*Requested Frequency/cies or Band: _____ Aeronautical Band _____

*Intended Coverage Area: _____

*Aircraft Call Sign: _____

Place: _____

Precise Antenna Location: _____

Equipment:

*Output Power: _____

*Manufacturer of Equipment: _____

*Type Designation (Model): _____

*Serial No.(List on attachment if needed): _____

No. of Base Stations: _____ No. of Handheld Stations: _____ No of Aircraft Stations: _____



Remarks:

Declaration:

I declare that the contents of this application form and any enclosures are true and correct in all aspects.

Print Name of Applicant: _____

Signature of Applicant: _____

Date: _____ Place: _____

Approved: _____

(Chairman of Public Utilities Commission)

Date: _____

License No.: _____

Annual Fee Level: _____

For determination of necessary bandwidth channel spacing and class of emission, please attach copy of technical data sheet.

License Fees -per unit per annum:

Equipment:

Base Station	\$100.00
Handheld station	\$50.00
Aircraft station	\$200.00

Note: All radios that are not handheld radios are classified as base stations. Assessed by power output exceeding 5 Watts