



**APPLICATION FOR
HF/VHF/UHF/SHF RADIO NETWORKS**

NCA FORM AP07



NCA FORM AP07

Payment Receipt No:

Date:

Application for HF/VHF/UHF/SHF Radio Networks
(Application to be submitted in triplicates).

1. Service Options

Please tick service (s) for which Authorisation is sought.

A. Aeronautical Services

- i. Aeronautical HF Fixed and Mobile Stations
- ii. Aeronautical VHF Fixed and Mobile Stations
- iii. Aeronautical Station – Commercial (Control Station)
- iv. Aeronautical Ground to Air Station (Glider, Hang Glider and Balloon)
- v. Aeronautical Ground Station (Airlines)
- vi. Aeronautical Navigational Aid & Radar (Private Aerodrome)
- vi. Aeronautical Radio Licence:
 - Aircraft (Take-off weight more than 3200kg)
 - Aircraft (Take-off weight more than 3200kg/less than 14000kg)
 - Aircraft (Take-off weight more than 14000kg)
 - Aircraft (Glider, Hang Glider and Balloon)

B. Land/Mobile Services

- i. HF Fixed and Landmobile Stations
- ii. VHF Fixed and Landmobile Stations
- iii. UHF/SHF Fixed and Landmobile Stations

C. Marine Services

- i. Marine HF Fixed and Mobile Stations
- ii. Marine VHF Fixed and Mobile Stations
- iii. Limited Coast Station
- iv. Ship Radio Station

D. Trunk Radio Network

- i. Trunk Radio Network (Urban)
- ii. Trunk Radio Network (Sub-Urban)
- iii. Trunk Radio Network (Rural)

2. Contact Information:

2.1 Name of Authorised Representative _____

2.2 Address (Location) _____

2.3 Address (Postal) _____

2.4 Telephone/Fax Numbers _____

2.5 E-mail address _____

3. Corporate Profile:

3.1 Registered Name of Company _____

3.2 Registered Trade Name (if any) _____

3.3 Registration Number _____

3.4 Date of Incorporation _____

3.5 Location Address/Registered Office _____

3.6 Telephone & Fax Numbers _____

3.7 E-mail address _____

4. Ownership Structure:

4.1 Directors:

S/N	NAME OF DIRECTORS	ADDRESS	NATIONALITY

4.2 Shareholders (holding 5% or more shares):

S/N	NAME OF SHAREHOLDERS	ADDRESS	NATIONALITY

5. Number of Employees (Actual and/or Proposed): _____

6. Undertaking:

I/We _____ hereby certify that the information supplied in this application form is true in all respects and I/We hereby give undertaking that upon grant of the Authorisation, I/We shall abide by the terms and conditions upon which the Authorisation is granted. I/We accept that my/our Authorisation, may be revoked and the appropriate penalty applied if it is established that I/We have been granted Authorisation based on incorrect information.

Signed _____ **Date** _____

Certified Passport Photographs (3 copies) of authorised representative & Company Seal.

