

LICENCE APPLICATION FORM – AMATEUR RADIO SERVICES

ECS 3/2011

Pursuant to the Communications Act, 2009

Guidance Notes

1) The completed application form should be submitted to:

Utilities Regulation & Competition Authority

UBS Annex Building East Bay Street P. O. Box N -4860 Nassau, Bahamas

- 2) The completed application form must be accompanied by the licence application fee and spectrum fee payable to Utilities Regulation & Competition Authority [URCA]. Details of the relevant fees can be found in the Fee Schedule on URCA's website.
- Applicants applying for a licence for Reciprocal Amateur Radio Services in The Bahamas <u>MUST</u> submit clear and valid copies of their Amateur Radio Certificate and Passport Identification Page.
- 4) This application form should be read in conjunction with the Licensing Guidelines (ECS 15/2009) and Fee Schedule as published from time to time on the URCA website.
- 5) Should there be questions or concerns regarding this form, please contact our office at telephone number: (242) 393 0234, email address: info@urcabahamas.bs or visit our website at www.urcabahamas.bs

TO BE COMPLETED IN FULL BY APPLICANTS APPLYING FOR A LICENCE FOR RECIPROCAL/LOCAL AMATEUR RADIO SERVICES (Please complete in type or block letters)

SECTION 1 - CONTACT DETAILS			
Name of applicant:			
Address of applicant:			
Street Name:			
Building Number:			
Postal Address:			
Town/City:			
Country:			
Telephone Number (s):			
Fax Number:			
Email address:			
SECTION 2 - PERSONAL DETAILS [NOTE: Please provide a copy of passport identification page(s) or birth certificate]			
Nationality:			
Date of birth:			
National Insurance/Social Security Number:			
Passport Number:			
Occupation:			

SECTION 3 - HISTORY OF APPLICANT

Has the applicant been convicted of any criminal offence; particular consideration will be given to offences of dishonesty, fraud, financial crime or an offence whether or not in The Bahamas or offences under legislation relating to electronic communications networks, carriage services or content services? YES NO If yes, please provide details:				
Is the applicant, or has the applicant been the subject of any proceedings of a disciplinary or criminal nature, or has been notified of any potential proceedings or of any investigation which might lead to those proceedings? YES NO If yes, please provide details:				
Has the applicant contravened any of the requirements and standards of the electronic communications regulatory system or the equivalent standards or requirements of other regulatory authorities (including a previous regulator), professional bodies, or government bodies or agencies? YES NO If yes, please provide details:				
SECTION 4 - SERVICE FOR WHICH APPLICATION IS SUBMITTED (Please specify by ticking the appropriate box below) NOTE: Local applicants applying for Amateur Radio must provide a copy of a Certificate, Diploma or Degree in Electronics/Engineering.				
Type of Application:				
Mr. a. bh				
Amateur Radio (Local)		Amateur Radio (Reciprocal)		
SECTION 5 – PREFERRED CALL SIGN:				
SECTION 6 – AMATEUR R	ADIO (RECIPROCAL) INFO	ORMATION (Please com	plete the following)	
Call Sign Number:				
Class of Licence: (Novice and Technician Classes are not accepted)	Advance	Extra	General	
Place of Issue:				
Date of Issue:				
Issuing Authority:				
Address of Issuing Authority:				

SECTION 7 – DETAILS OF STAY IN THE BAHAMAS (Please complete the following)

Duration of stay in The Bahamas:	Date From:	Date To:
Island(s) where applicant will visit in The Bahamas:		
Name of Hotel/ Accommodation:		
Address of Hotel/ Accommodation:		
Telephone Number of Hotel/ Accommodation:		
Additional Contact Number: (e.g. USA Cellular Number)		