

Form N4 – International Mobile Subscriber Identifier Forms



Forms included in this package are:

Form N4 (A) - Home Network Identity (HNI) Application

Applicants complete, sign, and return this form to apply for an HNI.

Form N4 (B) - Home Network Identity (HNI) Deployment

The recipient of an HNI assignment uses this form to notify URCA that the assigned code has been deployed.

Form N4 (C) - Request for Change in Home Network Identity (HNI) Assignment Information

HNI assignees use this form to notify URCA of a change in any of the assignment information; for example, a change in the name, address, or phone number of the contact person in the company holding the HNI. As a more complex example, this form should also be used to record the transfer of an HNI to a new company, as might happen as a result of a merger or acquisition.

Form N4 (D) - Home Network Identity (HNQ) Assignment Return

HNI assignees use this form to return to the pool any HNIs which are no longer required.

Completed forms should be submitted to The Director of Policy and Regulation, URCA, UBS Annex Building, East Bay Street, P.O. Box N-4860 Nassau, Bahamas

FORM N4-(A) HOME NETWORK IDENTITY (HNI) APPLICATION



1) Entity requesting assignment:

General description of the service to be provided, including area of service, and whether GSM-based or ANSI-41 CDMA based, requiring the issuance of an MNC in the format XX:

Individual Operating License..... Date of Issuance..... (Attach copy)

2) Is this request associated with a request for multiple mobile network codes (MNCs), per Section 8.4.3?

YES NO

If YES, please list the other IOLs associated with this request:

3) Do special considerations apply, per section 8.4.2?

YES NO

If YES, please specify the special consideration needed:

4) Is this request associated with an additional HNI assignment required for technological or operational constraints?

YES NO

If YES please provide a description of the technical or operational constraint as well as an explanation of how the assignment of an additional HNI resource will resolve the described technological or operational constraint (if required, please provide the required information via a separate attachment):



5) Contact name:

Company:

Address:

Room:

City, Island, Country:

Phone: Fax: E-mail:

6) Signature below indicates that the applicant:

- Certifies the accuracy of the information provided in this application,
- Commits to deploy any assigned HNI(s) within the time period specified by the IMSI Assignment Guidelines (Section 5.10),
- Certifies that any required authorization has been secured from URCA, and
- Understands and agrees that the use of any assigned HNI(s) in a manner other than in conformance with the assignment guidelines may result in forfeiture.

Authorized name:

Authorized signature:

Date of application:

FORM N4 (B) - HOME NETWORK IDENTITY (HNI) DEPLOYMENT FORM



By submitting this form, I certify that

HNI:

Assigned to:

Is deployed effective (date):

Authorized name:

Authorized signature:

Date of this notification:

FORM N4 (C) - REQUEST FOR CHANGE IN HOME NETWORK IDENTITY (HNI)
ASSIGNMENT INFORMATION



Effective (date):

The assignment information for HNI:should be changed. The changes are described below:

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.....

Authorized name:

Authorized signature:

Date of this notification:

Return completed application forms to URCA:



FORM N4 (D - HOME NETWORK IDENTITY (HNI) ASSIGNMENT RETURN



HNI:

Currently held by:

is no longer required effective (date)

and may be returned to the pool for assignment to another entity.

Authorized name:

Authorized signature:

Date of this notification:

Return completed forms to URCA: