



APPLICATION FOR RADIO STATION LICENSE

INSTRUCTIONS: All blanks must be filled up properly. Indicate "N/A" for items not applicable. Duly accomplished form must be submitted with required/supporting documents. Print all entries in block or CAPITAL LETTERS

Type of Radio Service :

| | | |
|--|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Fixed and Land Mobile | <input type="checkbox"/> Amateur | <input type="checkbox"/> Special |
| <input type="checkbox"/> Aeronautical | <input type="checkbox"/> Broadcast | <input type="checkbox"/> Others _____ |

Type: New Ren **Number of Years:** _____

Nature of Service :

CV (Commercial/Private) CO (Government) CP (Public Correspondence)

Number of unit(s) : _____ **Number of Years:** _____

_____ Repeater _____ Fixed _____ Land Base _____ Mobile _____ Portable

- 1 APPLICANT : _____
- 2 BUSINESS ADDRESS : _____
- 3 CONTACT PERSON : _____ CONTACT NO.: _____ EMAIL ADD.: _____
- 4 RADIO STATION LICENSE NO : _____ (If Applicable)
- 5 FREQUENCY (IES) : CH 1 _____ CH 4 _____
 CH 2 _____ CH 5 _____
 CH 3 _____ CH 6 _____
- 6 SERVICE AREA/ POINT OF COMMUNICATION : _____
- 7 PARTICULARS OF TRANSCEIVER EQUIPMENT(S)/STATION: (For New RSL only. Use separate sheets if necessary)

| | REPEATER | BASE | MOBILE | PORTABLE |
|----------------------|----------|------|--------|----------|
| Make | | | | |
| Type/Model | | | | |
| Serial Number | | | | |
| BW & Emission | | | | |
| Power Output | | | | |
| Type of Antenna | | | | |
| Antenna Height | | | | |
| Antenna Polarization | | | | |
| Antenna Gain | | | | |
| * Exact Location | | | | |
| Coordinates | | | | |
| Latitude | | | | |
| Longitude | | | | |
| Call Sign | | | | |

*For Mobile Station; Specify the Type of Vehicle and Plate Number.

| 8 | NAME OF OPERATOR (s) | PARTICULARS OF CERTIFICATE | EXPIRATION DATE |
|---|----------------------|----------------------------|-----------------|
| | | | |

9 CERTIFICATION

I HEREBY CERTIFY that the above entries are true and correct, that the radio station(s) shall be installed /constructed in accordance with the prescribed standards and in conformity with the existing Radio Laws and Regulations and that I shall be liable for any willful false statements made in this application under the Revised Penal Code of the Philippines.

 Signature over Printed Name of Applicant /
 or Authorized Representative

 Date

OR NO: _____
 DATE: _____, 20__

AMOUNT: _____

 CASHIER

PLEASE SEE BACK HEREOF FOR THE REQUIREMENTS TO BE SUBMITTED
 THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED

Revision No.: _____
 Revision Date: _____

DOCUMENTARY REQUIREMENTS FOR SUBMISSION



NEW

- 1 Duly Accomplished Form
- 2 Copy of Construction Permit (If Applicable)
- 3 Copy of Business Permit/DTI/SEC Registration
- 4 Copy of Permit to Possess

RENEWAL

- 1 Duly Accomplished Form
- 2 Original copy of License to be renewed