



APPLICATION FORM:

Authorization for service of activation microwave systems and admittance of radio transmitter - & and receiving systems.

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GENERAL INFORMATION

The application for authorization for service activation of all microwave systems and admittance of all radio transmitter/receiving systems requires specific information to be submitted.

In this application form the required information has been specified in the following sections:

SECTION 1: Contact and business information about the applicant.

SECTION 2: Detailed specification of application.

SECTION 3: Technical information.

SECTION 4: Equipment registration.

SECTION 5: Statement of approval.

ANNEXES

ANNEX 1: Statements to be submitted.

Please fill in the form in capital letters (block letters).

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SECTION 1: INFORMATION ABOUT THE APPLICANT

Contact information and personal data

1.1.a. Type of applicant. (Check the box if applicable).

- | | |
|--|--------------------------|
| • Sole proprietor | <input type="checkbox"/> |
| • General, Professional or Limited Partnership | <input type="checkbox"/> |
| • LLC, PLC, Foundation, Association, Cooperative Company | <input type="checkbox"/> |
| • Public corporation | <input type="checkbox"/> |

1.1.b. Personal data of the applicant.

- | | | | |
|------------------|---|----------------------|--------------------------------|
| • Name | : | <input type="text"/> | |
| • Address | : | <input type="text"/> | |
| • Contact person | : | <input type="text"/> | |
| • Telephone No, | : | <input type="text"/> | Fax No. : <input type="text"/> |
| • E-mail | : | <input type="text"/> | |

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Business information

- 1.2.a. If the applicant is a corporation, partnership, cooperative or other type of business enterprise, please state the names and addresses of the current managing directors, partners, members of the management and the secretariat.

Name:

Address:

•	<input type="text"/>
•	<input type="text"/>
•	<input type="text"/>
•	<input type="text"/>
•	<input type="text"/>

- 1.2.b. Trade name and official address.

• Trade name :	<input type="text"/>
• Address :	<input type="text"/>

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SECTION 2: DETAILED SPECIFICATION OF APPLICATION

Further specifications

2.1. Classification of application. (Check the box that is applicable).

<input type="checkbox"/>	Application for license of new radio links	
<input type="checkbox"/>	Modification of license or registration	
<input type="checkbox"/>	Notification of minor modification	
<input type="checkbox"/>	Other (please specify)	

2.2. Type of service/link. (Check the box that is applicable).

CLASS OF LINK	FREQUENCY BAND <small>Indicate frequency here</small>
<input type="checkbox"/> Fixed microwave link	
<input type="checkbox"/> Temporary fixed microwave link	
<input type="checkbox"/> Mobile microwave link	
<input type="checkbox"/> Other (please specify)	

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2.3. Type of microwave facility. (Check the box that is applicable).

☐ Transmit/receive

☐ Frequency diversity

☐ Space diversity

2.4. Purpose of modification. (Check the box that is applicable).

☐ Authorization to replace antenna

☐ Authorization to change the assigned frequency(cies)

☐ Authorization to add antenna

☐ Authorization to expand the capacity

☐ Authorization to relocate fixed station

☐ Other (please specify)

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SECTION 3: TECHNICAL INFORMATION

3.1. Site information.

	STATION A	STATION B
• Site location	<input type="text"/>	<input type="text"/>
• Transmit station name	<input type="text"/>	<input type="text"/>
• Transmit station coordinates	<input type="text"/>	<input type="text"/>
• Receive station coordinates	<input type="text"/>	<input type="text"/>

* If the system configuration consists of multiple base stations please specify the information separately in one (1) or more additional tables.

3.2. Technical data.

	STATION A	STATION B
• Type of modulation	<input type="text"/>	<input type="text"/>
• Transmission rate	<input type="text"/>	<input type="text"/>
• Transmit frequency	<input type="text"/>	<input type="text"/>
• Receive frequency	<input type="text"/>	<input type="text"/>

* If the system configuration consists of multiple base stations please specify the information separately in one (1) or more additional tables.

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3.3. Antenna data.

	STATION A		STATION B	
	Transmitting antenna	Receiving antenna	Transmitting antenna	Receiving antenna
• Type of antenna	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Diameter	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Gain	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Center line height above ground level	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Ground elevation above mean sea level	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Polarization	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Beam width	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Radiation pattern & opening angle	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• Antenna direction	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* If the system configuration consists of multiple base stations please specify the information separately in one (1) or more additional tables.

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3.4. Performance

	STATION A	STATION B
• Transmit power stability	<input type="text"/>	<input type="text"/>
• Transmit frequency stability	<input type="text"/>	<input type="text"/>
• Receiving RF input level	<input type="text"/>	<input type="text"/>
• BER	<input type="text"/>	<input type="text"/>
• Adaptive modulation/coding	<input type="text"/>	<input type="text"/>
• Remarks:	<input type="text"/>	

* If the system configuration consists of multiple base stations please specify the information separately in one (1) or more additional tables.

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SECTION 4: EQUIPMENT REGISTRATION LIST

4. Equipment registration list.

Equipment	Manufacturer	Model	Serial no.	Quantity
• Antenna				
• Transmitter				
• Receiver				
• Modem				
• Mux mod.				
• Terminal Equipment				

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Equipment	Manufacturer	Model	Serial no.	Quantity
• UPS				
• Other equipment				
•				
•				
•				
•				
•				
•				
•				
•				
•				
•				
•				
Remarks:				

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SECTION 5: STATEMENT OF APPROVAL

Signed statement of approval

On behalf of the applicant, I herewith certify:

1. That the applicant shall at all times and in every respect comply with the terms and conditions of a license to be granted, taking into consideration that the license may be amended from time to time.
2. That the applicant shall at all times carry out the legal instructions of the director of BT&P.
3. That the information provided by me on behalf of the applicant is accurate and complete in every respect.

• Signature	Full name of the signatory(ies)
• <input type="text"/>	<input type="text"/>
• <input type="text"/>	<input type="text"/>
• <input type="text"/>	<input type="text"/>
• <input type="text"/>	<input type="text"/>
• <input type="text"/>	<input type="text"/>

Postion of applicant (corporation, cooperative venture or other).

-
- Date:

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ANNEX 1: STATEMENTS TO BE SUBMITTED

The required statements to be submitted with the application vary with the legal (business) form of the applicant.

Table 1.1 on page 14 provides an overview of the different legal (business) forms and which statements and documents are required per type. The checked boxes per legal (business) form in this table are leading in this regard.

A checked box indicates that the statement or document must always be submitted. **Table 1.1** includes only the required statements and documents in case of exploitation of a service. If only private use is applicable (construction and maintenance) a business plan is not required.

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Table 1.1 Overview of statements to be submitted per legal (business) form.

Certificates to be submitted	Sole Proprietor	General Partnership, Professional Partnership or Limited Partnership	LLC, PLC, Foundation**, Association**, Cooperative Company	Public corporation
Constituent act*				✓
Original excerpt of registration at the Chamber of Commerce and Industry (not older than 3 months)	✓	✓	✓	
Copy of the articles of incorporation of the organization		✓	✓	
Copy of the business license of the corporation issued by the country of Curaçao		✓	✓	
Copy of the shareholders' register of the company		✓	✓	
Original certificate of good conduct of the Directors (not older than 3 months)	✓	✓	✓	
Financial guarantees in connection with financing	✓	✓	✓	
Business plan*	✓	✓	✓	✓
Technical description of the project	✓	✓	✓	✓
Graphic and Geographic location of the network configuration / installation	✓	✓	✓	✓
Folders with technical information regarding the equipment	✓	✓	✓	✓

* If only private use is applicable a business plan and a constituent act are not required. All other statements and documents are mandatory.

** A Foundation or Association does not require a business license to be delivered. In the case of an LLC or PLC or Cooperative Company a business license is mandatory.