

APPLICATION FOR PRIVATE MOBILE RADIO SPECTRUM LICENSES

FORM: SL-02

APPLICANT'S DECLARATION

1.1 I declare that:

- the information provided in this application is complete and correct;
- any equipment and / or radio spectrum licensed as a result of this application will be used in compliance with the applicable regulatory framework;
- I / we will notify CRA of any changes to the information provided;
- I am authorized to sign this application on behalf of the applicant.

1.2 Name:

1.3 Position:

1.4 Signature:

1.5 Date:

1.6 Company stamp (if applicable):

APPLICANT INFORMATION

2.1 CRA Customer Number:

*Please note. If you have an existing customer number and have previously provided the following information you need only to complete this section if your details need to be amended in our records.*

2.2 Name / Company / Organisation:

2.3 Nationality / Place of registration:

2.4 Profession:

2.5 PO Box:

2.6 Address:

2.7 Main contact:

2.10 Position:

2.8 Contact email:

2.11 Mobile Tel:

2.9 Office Tel:

2.12 Fax:

INVOICING INFORMATION (IF DIFFERENT FROM ABOVE)

3.1 Name / Company / Organisation:

3.2 PO Box:

3.3 Address:

3.4 Invoicing contact:

3.7 Position:

3.5 Contact email:

3.8 Mobile Tel:

3.6 Office Tel:

3.9 Fax:

APPLICATION TYPE (TICK AS APPROPRIATE)

New application:

Renewal:

Modification:

Cancellation:

PRIVATE MOBILE RADIO

Type of PMR license applied for:

PMR – Frequency assigned, Network

PMR – Frequency assigned, Area

PMR – Block assigned

PRIVATE MOBILE RADIO – FREQUENCY ASSIGNED NETWORK (WITH SINGLE BASE STATION)

Outline of requirement for a frequency-assigned PMR license:

Base station location:

Lat:

Long:

Site Address:

**Base Station Equipment Details:**

Manufacturer:		Model:		Power:	
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**Details of Associated Equipment:**

Mobile Stations (For Each Station)		Hand-helds (For Each Station)	
Manufacturer:		Manufacturer:	
Model:		Model:	
Qty:		Qty:	
Power:		Power:	

Service area (radius from base station) (km)	
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Call sign / system ID*:	
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**Base Station Antenna Details:**

Antenna Type:	
Antenna Height:	
Antenna gain	
Azimuth of Maximum Radiation*:	
Angular width of radiation main lobe*:	

**Band applied for - VHF:**

40 MHz		30-33.7MHz		33.7-37 MHz		37-40 MHz		40-47 MHz	
150 MHz		146-153 MHz		160 MHz		156-165 MHz			
Other:									

**Band applied for - UHF:**

360-380 MHz		410-430 MHz		450-470 MHz	
Other:					

Number of channels required:	
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**Channel bandwidth required:**

6.25 kHz		12.5 kHz		25 kHz	
Simplex		Duplex			

**ADDITIONAL INFORMATION**

**\*Optional Field**

**PRIVATE MOBILE RADIO – FREQUENCY ASSIGNED, AREA**

**Outline of requirement for an area-based PMR license:**

**Equipment Details:**

Base Stations (For Each Station)		Mobile Stations (For Each Station)		Hand-Helds (For Each Station)	
Manufacturer:		Manufacturer:		Manufacturer:	
Model:		Model:		Model:	
Qty:		Qty:		Qty:	
Power:		Power:		Power:	

**Area for which license is required:**

Centre point:		Lat:		Long:		Radius (kms)			
or									
Northern limit:	Lat:		Long:		Western limit:	Lat:		Long:	
Southern limit:	Lat:		Long:		Eastern limit:	Lat:		Long:	

**Band applied for - VHF:**

40 MHz		30-33.7MHz		33.7-37 MHz		37-40 MHz		40-47 MHz	
150 MHz		146-153 MHz		160 MHz		156-165 MHz			
Other:									

**Band applied for - UHF:**

360-380 MHz		410-430 MHz		450-470 MHz	
Other:					

**Number of channels required:**

Channel bandwidth required:									
6.25 kHz		12.5 kHz		25 kHz					
Simplex		Duplex							

**ADDITIONAL INFORMATION**


**PRIVATE MOBILE RADIO – BAND ASSIGNED**

**Outline of requirement for a band-assigned PMR license:**


**Network & Equipment Details: (To be provided in a separate sheet)**

**Band applied for - UHF:**

360-380 MHz		410-430 MHz		450-470 MHz	
Other:					
Bandwidth of the band required:					

6.25 kHz		12.5 kHz		25 kHz		
ADDITIONAL INFORMATION						
DOCUMENTS TO BE ENCLOSED						
Copy of CR / Copy of ID			Copy of Corporate card			
Network Diagram			Detailed Technical Specifications			
Antenna Radiation Pattern			Copy of receipt of final payment (For Cancellation)			
Original license (For Cancellation)			Copy of the shipment document (Airway bill & packing list) or Declaration that equipment will be written-off under the supervision of CRA staff			
<p>For Area and block Licenses applicant is additionally required to provide justifications:</p> <p>a) that it currently or potentially has a major demand for frequency spectrum</p> <p>b) that it has the competence to manage the assigned frequencies or blocks of spectrum on area / national basis respectively with due attention to efficient use of spectrum, avoidance of interference and the resolution of any cases of interference which may arise.</p>						
<b>Note:</b> Filled-in application form must be routed through MoFA for Foreign Missions & Embassies						
APPLICATION SUBMISSION						
<p>Please send completed applications to (by fax, post, courier or hand deliver):</p> <p>Spectrum Management Department</p> <p>Communications Regulatory Authority (CRA)</p> <p>P.O. Box 23404, Al Nassr Tower, Post Office Roundabout, Al Corniche,</p> <p>Doha, Qatar</p>						
FOR CRA INTERNAL USE						
	For Spectrum Planning Section			For Spectrum Licensing Section		
Date Received:						
Approval:	Approved:	Yes	No	Approved:	Yes	No
License Number:						
Remarks:						
Date Completed:						