

APPLICATION FOR AERONAUTICAL GROUND BASED NAVIGATIONAL AIDS STATION LICENSE

Form: SV-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:

INSTALLATION / AERODROME LOCATION

Location:

Latitude:

Longitude:

NAVIGATION AIDS EQUIPMENT

Non-directional radio beacon

Manufacturer/ Model

Antenna height

| | | | |
|--|--|----------------|--|
| RF Power | | Frequency Band | |
| Operational range | | Bandwidth | |
| | | | |
| VHF Omni-directional radio (VOR) | | | |
| Manufacturer/ Model | | Antenna height | |
| RF Power | | Frequency Band | |
| Operational range | | Bandwidth | |
| | | | |
| VHF Marker beacon | | | |
| Manufacturer/ Model | | Antenna height | |
| RF Power | | Frequency Band | |
| Operational range | | Bandwidth | |
| | | | |
| Instrument landing system | | | |
| Manufacturer/ Model | | Antenna height | |
| Runway designator(s) | | Runway heading | |
| Frequency (ies) | | Bandwidth | |
| RF Power | | Antenna gain | |
| | | | |
| DME Pair | | | |
| Manufacturer/ Model | | Antenna height | |
| Runway designator(s) | | Runway heading | |
| Frequency (ies) | | Bandwidth | |
| RF Power | | Antenna gain | |
| | | | |
| Other (please specify) | | | |
| Manufacturer/ Model | | Antenna height | |
| Frequency (ies)/ Band | | Bandwidth | |
| RF Power | | Antenna gain | |
| Operating Range | | | |
| | | | |
| Integrated System (If Navigational Aids equipment form different components of the same system, then this should be illustrated here) | | | |
| | | | |

ADDITIONAL INFORMATION

| |
|--|
| |
| |
| |
| |

DOCUMENTS TO BE ENCLOSED

| | |
|-------------------------------------|---|
| Copy of the CR | Copy of the corporate card |
| Detailed Technical Specifications | Network Diagram |
| QCAA approval/authorization | <u>For Cancellation:</u> Copy of the shipment document (Airway bill & packing list) or Declaration that equipment will be written-off under the supervision of CRA staff |
| Original license (For Cancellation) | Copy of receipt of final payment (For Cancellation) |

APPLICATION SUBMISSION

Please send completed applications to (by fax, post, courier or hand deliver):

Spectrum Management Department

Communications Regulatory Authority (CRA)

P.O. Box 23404, Al Nassr Tower, Post Office Roundabout, Al Corniche,

Doha, Qatar

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: | | | | | | |