

Montserrat

Info-Communications (Applications and Forms) Rules, 2011

S.R.O. 38 of 2011

FORM F

[Rule 5]

**APPLICATION FOR
CERTIFICATION OR APPROVAL OF TERMINAL EQUIPMENT
UNDER THE INFO-COMMUNICATIONS DEVELOPMENT ACT
2009**

- | | |
|--|---|
| <input type="checkbox"/> Cellular Phone | <input type="checkbox"/> Radio Transmitter |
| <input type="checkbox"/> Cordless Phone | <input type="checkbox"/> Satellite Earth Station |
| <input type="checkbox"/> Telephone Instruments | <input type="checkbox"/> Mobile Radio |
| <input type="checkbox"/> Telex Equipment | <input type="checkbox"/> Wireless Remote Device |
| <input type="checkbox"/> Facsimile Machine | <input type="checkbox"/> PABXs |
| <input type="checkbox"/> Modems | <input type="checkbox"/> Telecommunications Switching Equipment |
| <input type="checkbox"/> Pagers | <input type="checkbox"/> Other equipment Emitting a radio signal |
| <input type="checkbox"/> Radio Receivers | <input type="checkbox"/> Any other user Equipment to be Attached to a Telecommunications Network or service |

Name of Applicant: _____

Info-Communications Authority of Montserrat

P.O Box 165, St. Peters

Montserrat

Telephone Number: 1 (664) 491-3789 Fax Number: 1 (664) 491-3789

Email: xxxxxx@xxxxxxxxxx Website: www.xxxxxxxxxxxx

Montserrat

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(Please complete fully in type or block letters)

PART 1 - APPLICANT

1. Name and address of applicant:

2. Designated Contact person _____

3. Telephone Number: _____

4. Fax Number: _____

5. Email address: _____

6. If approval is required for a registered business, please state:-

(a) Nature of business (company, partnership, sole trader, etc)

(b) Business Registration Number _____

7. If approval is required for an individual/personal use, please state:-

(a) Date of Birth _____

(b) Nationality _____

(c) Occupation _____

(d) Identification Card Number, Place of Issue

(e) Passport Number, Country of issue and Expiry Date

PART 2 – TECHNICAL DETAILS

1. Select the following options where applicable:

Approval has been granted by another OECS Member Country (ies)

Approval granted by a foreign or international standards agency

Agency (cies)_____

New Approval Requested: Equipment has not undergone any type approval process

2. Radio Communications Equipment

a) Equipment_____

b) Type_____

c) Class_____

d) Manufacturer's Name_____

e) Transmit Frequency Bands (MHz)_____

f) Receive Frequency Bands (MHz)_____

g) Output (Watts)_____

h) ITU Emission Designator_____

3. Details of the purpose for which equipment is intended to be used

Montserrat

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S.R.O. 38 of 2011

4. Certificate Holder (*this is the person/business to whom the approval or certificate would be issued, this name would appear on the certificate*)

5. Address of Certificate Holder _____

DECLARATION AND SIGNATURE

I, the undersigned, do hereby declare that the information provided in this application is correct and accurate to the best of my knowledge. If granted a certificate or approval, I agree to operate in accordance with the rules, regulations and conditions established in accordance with the Info-Communications Development Act 2009. I understand that a certificate issued for this type of terminal equipment is valid on the condition that the equipment to be used is identical to the one tested or described and that any changes to the name, model or type of equipment approved will require a new application for approval or certification. I also understand that the certificate or approval may be revoked if the terminal equipment is used outside of the scope of approval or has been obtained through the provision of false information or other illegal means.

Name of

Applicant _____

Signature _____

Date _____