

Request for advice on operation of radiocommunications devices (class licences)



Instructions for completion

- Print clearly. Forms which are illegible, unclear or incomplete details may be returned for clarification.
- If space is insufficient, you may attach a separate sheet.
- Cheques or money orders should be made payable to the Receiver of Public Monies, Australian Communications Media Authority.

Under subsection 140(1) of the Radiocommunications Act 1992, as the person operating or proposing to operate the radiocommunications device as described below, I hereby request advice on whether operation of the device is authorised under a class licence or under the class licence specified below.

Where to send this form

Completed forms should be forwarded with the appropriate fee to:
 Radiocommunications Licensing and Assignments Section
 Operations and Services Branch
 Australian Communications and Media Authority
 PO Box 78, Belconnen ACT 2616
 Telephone: 1300 850 115
 Facsimile: (02) 6219 5347
 Email: licensing@acma.gov.au

Applicant's details

Customer number (if known)

Name

SURNAME
GIVEN NAMES

Company name and ACN

Trading name (if applicable)

Postal address

Contact numbers

HOME ()
WORK ()
MOBILE
FACSIMILE ()

Declaration

I declare that to the best of my knowledge the information given in the application is accurate and complete.

SIGNATURE
DATE

OFFICE USE ONLY

BATCH NO.	AMOUNT ENCLOSED
REG NO.	CHEQUE NUMBER BR
DATE	DRAWER
CASH REGISTER IMPRINT	

Description of radiocommunications device

Type/model number

Manufacture

Country of origin

Purpose/use of equipment

Operating frequency(ies) (MHz)

Antenna type

Maximum field strength at a specified distance from the antenna

dBµV/m @	METRES
----------	--------

Class licence details (if known)

Additional information should be written on page 2.

PRINT FULL NAME
POSITION IN ORGANISATION

