

# Application for an apparatus licence in the broadcasting services bands (BSB)



## INSTRUCTIONS

- > This form should be used to apply for an apparatus licence to authorise the operation of a radiocommunications transmitter within the broadcasting services bands or to vary an existing apparatus licence.
- > A separate application form is required for each licence.
- > **Please print clearly.** Unclear or incomplete applications may delay processing.

### Please note

- > Giving false or misleading information is a serious offence. Providing documents that are false and misleading is also a serious offence.

### Disclosure of personal details

- > Information provided in the fields marked with an asterisk (\*) is required, by section 147 of the *Radiocommunications Act 1992*, to be disclosed to the public by the Australian Communications and Media Authority (ACMA) in a Register of Radiocommunications Licences. The register is on the ACMA website [www.acma.gov.au](http://www.acma.gov.au) (search 'Register of Radiocommunications Licences') and is also available at any ACMA office.

### Collection of personal information in this form

- > The collection of personal information in this form enables the ACMA to assess the applicant's capacity to provide the community broadcasting service. This information is required under section 80 of the BSA. Information on the *Privacy Act 1988* and the ACMA's Privacy Policy is available from [www.acma.gov.au/privacypolicy](http://www.acma.gov.au/privacypolicy).

### Definitions and licensing legislation

- > If you need more information about the definitions and licence conditions, please contact ACMA.

### Disclaimer

- > A transmitter licence does not confer an exclusive right to broadcast in licensed area.
- > Licences issued for periods up to and including one year must be paid for in full on invoice (per the ACMA trading terms).
- > Licences issued for any period between one and 5 years may be paid for in full at time of application or by annual instalments.

### When to apply

- > Applicants are requested to submit their applications at least 8–12 weeks before the proposed licence commencement date. Applications submitted outside of this timeframe may not be assessed in time for the proposed commencement date.

### Where to send this form

- > **By email:**  
Australian Communications and Media Authority  
Customer Service Centre  
[info@acma.gov.au](mailto:info@acma.gov.au)
- > **By mail:**  
Australian Communications and Media Authority  
Customer Service Centre  
PO Box 78  
BELCONNEN ACT 2616

### Further information – Customer Service Centre

- > Telephone 1300 850 115
- > Email: [info@acma.gov.au](mailto:info@acma.gov.au)

## ACMA USE ONLY

File number

Client number

Correspondence number

Licence number

Transaction number

**SECTION 1: APPLICANT'S DETAILS**

Client number (if known):

--

Applicant name\* (licensee name):

--

ACN number\* (if applicable):

--

*Note: Applicant company must attach a certificate of incorporation to the application.*

Trading name\* (if applicable):

--

Contact surname:

Given names:

Title:

--	--	--

Position in organisation:

--

Postal address\*:

State:		Postcode:	

Residential or business address\* (if the same as postal address, please print 'as above'):

State:		Postcode:	

Telephone numbers:

Work:		Home:	
Mobile:			

Email:

--

**SECTION 2: LICENCE DETAILS**

**Application type (TICK ONE ONLY):**

- New licence       Variation to an existing licence

**Type of service:**

- Radio FM  
 Radio AM  
 TV

**Type of licence (CHOOSE ONE ONLY):**

- National  
 Commercial – provide details:

Broadcasting service licence number:

Call sign allocated:

SL	
----	--

- Community – provide details:

Broadcasting service licence number:

Call sign allocated:

SL	
----	--

- Open narrowcasting service  
 Temporary community broadcasting service (Form ACMA B42 must accompany this form)  
 Scientific  
 Temporary transmission  
 Special event (a special event check list must accompany this form)  
 Retransmission of existing radio broadcasting service – provide details:

- Satellite input       Off air input

Callsign to be retransmitted:

Input frequency:

	MHz (Channel )
--	----------------

Location:

--

**Note 1:** Please use [ACMA Form B84](#) for digital TV retransmission applications.

**Note 2:** If you intend to retransmit a commercial or community service, please provide written consent from the relevant licensee.

**Broadcaster identifier (how the service will be identified on-air):**

--

**Proposed commencement date:**

**Cessation:**

--	--

**Dates/days of operation (if the proposed service is not full-time):**

--

ACMA USE ONLY	
Licence number:	
Drop through number (s. 34 of BSA decision):	

**Variation of licence parameters:**

Apparatus licence number:

Details of the variation:

**Required licence period:**

Licences for open narrowcasting, national, retransmission services may be issued for periods up to 5 years. Please indicate the required period below. Licences for commercial, community and temporary community broadcasting services will be issued for periods specified on the broadcasting service licence only.

Days:

Weeks:

Months:

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

One year

2 years

3 years

4 years

5 years

**Payment options for licence fee**

Licences issued for periods up to and including one year must be paid for in full on invoice (per the ACMA trading terms). Licences issued for longer periods may be paid for in full on invoice or by annual instalments.

Full payment

Annual instalments

### SECTION 3: TRANSMITTER SITE DETAILS

**SECTION 3.1:** This section must be completed by applicants applying for licences to broadcast commercial, community or open narrowcasting services identified in licence area plans prepared by ACMA (or previously by the ABA)

Name of licence area plan:

Technical specification number (as specified in the licence area plan):

**SECTION 3.2:** This section must be completed by all applicants including the above applicants who want to operate the transmitter from the site other than that specified in the licence area plan

Site number (if known, please complete, then go to *Section 4 – Emission details*):

Site name:

Site address:

State		Postcode	

Site height AHD:

	metres
--	--------

Map name:

Map number:

Map scale:

--	--	--

**Australian Map Grid Reference** (10 metre accuracy is required):

Zone:

Easting:

Northing:

--	--	--

OR

Zone:

Latitude:

Longitude:

--	--	--

OR

Latitude:

Longitude:

Degree	Minute	Seconds	Degree	Minute	Seconds

**Note:** Please attach a map of the site. You are advised to check the accuracy of the proposed site details with the ACMA's Customer Service Centre. See page 1 for contact details.

If you propose to co-site with another service, please provide details:

Intended coverage area (list of towns or local government areas):

**SECTION 4: EMISSION DETAILS**

*Note: You are required to complete Section 4 – Emission details even if you intend to operate the transmitter from the nominal site as specified in the licence area plan.*

ACMA USE ONLY	
Spectrum access number:	

**SECTION 4.1 – FM RADIO OR TELEVISION: This section must be completed by applicants intending to provide an FM radio or TV service**

Preferred frequency\*:  MHz                      OR                      TV channel:

*Note: ACMA may not be able to allocate the preferred frequency.*

Effective Radiated Power\*:  watts

Height of antenna\*:  metres (above ground)

**Antenna polarisation\*:**

- Horizontal
- Vertical
- Mixed

**Sound mode:**

- Mono
- Stereo/dual sound

**Antenna radiation pattern:**

- Omnidirectional
- Directional (please provide details):

Bearing	Maximum ERP (watts)

OR

Antenna model & type (attach photo if relevant):

**SECTION 4.2 – AM RADIO: This section must be completed by applicants intending to provide an AM radio service**

**Preferred frequency\*:**

 kHz

**Note:** ACMA may not be able to allocate the preferred frequency.

**Transmitter power\*:**

 watts

**Sound mode:**

- Mono
- Stereo/dual sound

**Physical mast height\*** (applicants intending to provide more than one mast should specify the height of the tallest mast):

 metres (above ground)

**Mast details:**

- Omnidirectional**

**Mast height** (in electrical degrees):

 metres (above ground)

- Directional**, please provide details:

Mast number	Mast height (in electrical degrees)	Orientation of mast number 1 (in electrical degrees)	Mast spacing of mast number 1 (in electrical degrees)	Phase of mast number 1 (in electrical degrees)	Current ratio of mast number 1
1					
2					
3					
4					
5					

**SECTION 5: Applicant's declaration**

I/We declare and acknowledge the following:

1. In making this application, I/we have not relied on any representation made by ACMA, its officers, employees or agents.
2. The information on this application and in any accompanying documents are true and correct.
3. Any attachment required by this application form constitutes part of this application form.
4. The equipment to be employed is of a type which meets the requirement set out in the *Radiocommunications Act 1992*.

**Applicant that is a company or an incorporated association:**

Signature	Date
Print name and title	

Signature	Date
Print name and title	

Signature	Date
Print name and title	

**Individual applicant:**

Signature	Date
Print name and title	