


FORM:TCRA/VSAT	 TANZANIA COMMUNICATIONS REGULATORY AUTHORITY Application for VSAT License				TCRA Use Only (File Number) Admin ID:
Classification					
Status					
Status Date					

A. Applicant Information

1. Applicant Name:		2. Telephone number:	
3. Business or other name used (for business):		4. Fax number:	
5. Mailing Address(number & street/post office box number):		6. E- mail:	
7.City address:	8.District:	9. Region:	

B. Operations Address (person/organization responsible for daily operations if other than 1)

10. Operator Name:		11. Phone Number:	
12. Operator Company/Agency Name:		13. Fax Number:	
14. Country of registry of this MES (Mobile Earth station):			
15. City address:	16. District/Region:	17. Country:	

C. Billing Address (If other than 1)

18. Name of the Accounting Authority:		19. Phone No:	
		20. Fax No:	
21. Name of the Service Provider:		22. Phone No:	
		23. Fax No:	

D. Type of Application

24. This application is for () a new license () a change to an existing licence () Major () Minor () renewal of an existing licence () No change () Major () Minor
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E. Nature of Service

25. This application is for a licence to operate a satellite system in the service shown (tick one)

Inmarsat - A
 Inmarsat - B
 Inmarsat - C
 Inmarsat - M
 Inmarsat-phone Mini-M
 Ground Earth Station
 Transportable Satellite Transceiver
 Tracking Telemetry & command (TT & C) Earth Station
 Cross border Private V-SAT
 Domestic Private V-SAT
 Domestic Commercial V-SAT
 Cross border Commercial V-SAT
 Receive Only V-SAT Operator
 V-SAT terminal for Radio determination Services V-SAT Terminal for Space
 Research related services
 V-SAT Terminal for Amateur related services

F. Site Data (Location of the Earth Satellite)

26. Site Number:	27. Site Name:			
28. Location Place Name:				
29. Location coordinates:	30. Longitude:	Deg	Min	Secs
	31. Latitude:	Deg	Min	Secs
	32. Region:			
33. Site Elevation (meters AMSL):				
34. Remarks:				

G. Transmitter Equipment Data

35. TCRA ID:	36. Type Approval Number:	
37. Manufacturer name:	38. Model:	39. Serial Number:
40. Transmitter: Power (watts)	41. Effective Radiated: Power (watts)	
42. Equipment Manual Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		
43. Station Class:		
44. Remarks:		

H. Antenna Data

45. TCRA ID:	46. Manufacturer Name:	47. Model:			
48. Height above ground: (meters):	49. Polarization:	Directional:	Circular:	Other	

I. Frequency Data

50. Frequency Band:	51. Date of Issue:	52. Date of Renewal:
53. Emission:	54. Tolerance:	

DECLARATION

I,-----
(Print name)

declare that the information given in this application form is true and correct.

SIGNATURE

DATE

OFFICIAL STAMP