

THE UNITED REPUBLIC OF TANZANIA
TANZANIA COMMUNICATIONS REGULATORY AUTHORITY (TCRA)
ISO 9001:2015 CERTIFIED



APPLICATION FOR AUTHORIZATION FOR LANDING RIGHTS IN MAINLAND TANZANIA

(To be filled in Capital Letters)

(Under Regulation 8 of the Electronic and Postal Communications (Radio and Television Broadcasting Content) Regulations, 2018)

A. APPLICANT INFORMATION

S/N	ITEM
1	Name of applicant (Company Name)
2	Physical address
3	Telephone number (Fixed and Mobile) Fax number
4	E-mail address Website
5	Contact Person
6	Telephone number (Fixed and Mobile) Fax number
7	Receipt No. of Landing Rights Fee..... Dated.....

B. APPLICATION SUMMARY

S/N	ITEM	
1	Application receipt number	
2	Type of Permit	Landing Rights
3	Service area	Mainland Tanzania
4	Service Category (Tick the appropriate) <input type="checkbox"/> Subscription Content Services <input type="checkbox"/> Free to Air Television Channels <input type="checkbox"/> Other (Please specify)	
5	Market Segment (Tick the appropriate) <input type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> District	

C. COMPANY INFORMATION

S/N	ITEM
1	Applicant's Registration/Incorporation No. (Attach Certified copy)..... Date of Registration/Incorporation.....
2	Country of Registration/Incorporation

D. TECHNICAL INFORMATION

(i) Content Services by Subscription Provider (Aggregation information)

S/N	ITEM
1	Satellite name
2	band
3	Address

(ii) Satellite Licensing Authority Information

S/N	ITEM
1	Name of Licensing Body
2	Country
3	Licence No. Dated.....
4	Validity.....

(iii) Technical Information

Name of Satellite & Transponder	Nature of Signal			
	<input type="checkbox"/> Encrypted <input type="checkbox"/> Unencrypted <input type="checkbox"/> Compressed	<input type="checkbox"/> Analogue <input type="checkbox"/> Digital	<input type="checkbox"/> Band <input type="checkbox"/> KU-Band <input type="checkbox"/> KA-Band	<input type="checkbox"/> Free to Air <input type="checkbox"/> Subscription
Up-Link Frequency: _____ -	Down-Link Frequency: _____		FEC: _____ -	
Transponder: _____ -	Symbol Rate: _____ -		Orbital Loc: _____	
Polarization: _____ -	Modulation: _____			
Encryption System: _____	EIRP: _____			
Up-Link Location: _____				

Set Top Box (Hybrid or Non Hybrid)

Proprietary

Nonproprietary

Up-link Location.....

E. DECLARATION

I hereby certify that information supplied in this application form is true in all aspects and I hereby declare that upon authorization, I shall abide by the terms and conditions upon which Landing Rights is granted. I accept that Landing Rights may be revoked and appropriate penalty applied if it is found that I have been granted authorization based on incorrect or false information furnished to the Authority.

Name	Relationship with applicant (e.g., Consulting engineer, etc.)
E-mail address	Telephone number
Signature and official stamp	Date (DD / MM / YYYY)

NOTE:

- (i) Fill the Form Carefully;
- (ii) Submit the Form to:

Director General
Tanzania Communications Regulatory Authority
P.O. Box 474
14414 DAR-ES-SALAAM.

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1. EVALUATING OFFICER'S COMMENTS

I have evaluated the application and find that the information given is relevant/not relevant and therefore recommend/do not recommend for further evaluation by the Evaluation Committee.

Name

Title

Signature

Date

2. APPROVING OFFICER'S COMMENTS

The information on this form has been scrutinized and found complying/not complying with the rules and framework of the Broadcasting Services.

Therefore, approval for further authorization processes granted/not granted.

Name

Position

Signature

Date