

The United Republic of Tanzania
TANZANIA COMMUNICATIONS REGULATORY AUTHORITY
ISO 9001:2015 CERTIFIED



Annex B: Application Form

Name of Applicant	
Full Address	
Contact person	Name _____ Address _____ _____ Email _____ Telephone _____
Name and position of the 2 persons signing the Application Form	<u>Person 1</u> Name _____ Position _____ <u>Person 2</u> Name _____ Position _____
Authorised persons (3) who will be responsible for bidding.	<u>Person 1</u> Name _____ Address _____ Email _____

	<p>Telephone _____</p> <p><u>Person 2</u></p> <p>Name _____</p> <p>Address _____</p> <p>Email _____</p> <p>Telephone _____</p> <p><u>Person 3</u></p> <p>Name _____</p> <p>Address _____</p> <p>Email _____</p> <p>Telephone _____</p>
Number of Lots	
<p>Amount of Bank Guarantee</p> <p>Number of Lots x Reserve Price</p>	
Authorised signatures	<p><u>Person 1</u></p> <p>Signed _____</p> <p>Date _____</p> <p><u>Person 2</u></p> <p>Signed _____</p> <p>Date _____</p>