

TELECOMMUNICATIONS REGULATORY COMMISSION

Telecommunications Regulatory Commission Government of the British Virgin Islands L.M. Business Centre, P.O. Box 4401, Road Town, Tortola British Virgin Islands VG1110 Tel: (284) 468-4165, Ext. 4165

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Email: RL Applications@trc.vg

nail: RL Applications@trc.vg			
APPLICATION FOR CITIZEN BAND RADIO LICENCE			
Please tick the appropriate box (es))			
□ New □ Renew □ Change			
PLEASE PRINT INFORMATION			
Incomplete application forms will not be processed.			
SECTION A – APPLICANT AND RADIO DETAILS			
Name of Licensee:			
Licence No.: Call Sign			
Address:			
Address: City State Country			
Location of Station:			
City State Country			
Email:			
Equipment Details			
Transmitter Make:			
Transmitter Model:			
Transmitter Serial Number:			
Receiver Make:			
Receiver Model:			
Receiver Serial Number:			
Power Supply:			

Antenna: _			
Frequency Range: _			
Authorised Frequen	cy:		
Power: _	Type of Emission:		
SECTION B – DE	CLARATION		
I declare that all de that I will abide by	etails shown above are corre the terms of the Licence. I al	ect to the best of my knowledge and so declare that I have no objection to lisclosed to the Telecommunications	
Signature of Applica	ant:		
Full name (Block C	apitals):		
Date:			
If you are signing or	n behalf of a Company or org	anisation please state:	
Name of organisation	on:		
Position:			
OR OFFICIAL USE O	NLY		
ate of Issue:	Issued by:	Licence No.:	
xpiry Date:			