

ANNEXURE II

**Application from an individual for a licence to Establish, Maintain and Work an Amateur Wireless Telegraph Station in India.
(See rules 6 & 8)**

1. Name: (in Capitals, as it is in DOB Certificate).....

2. Father's Name and Address
.....
.....

3. Address (Present) :
.....
.....
City..... Dist.....Pin.....

4. Address (Permanent) :
.....
.....
City..... Dist.....
State..... Pin code.....
Contact Phone No:.....

5.	Date of Birth	Place of Birth	Nationality	Occupation
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6. (a) Category of licence applied for	(b) Exact location of the Station (including name of City, Dist, State & PIN)
AMATEUR RADIO RESTRICTED GRADE	

7. Do you hold Radiotelegraph Operator's Certificate? If yes, give particulars:				
Name of the Certificate	No.	Date of Issue	Validity	

8. Particulars of Amateur Station Operator's Examination:-		
<u>Name</u>	<u>Centre</u>	<u>Month of Examination</u>
ASOC		

9. Particulars of apparatus to be used:			
Apparatus used	Manufacturer's Name	Type No.	Frequency Range R.F.Power Output
Transmitter			
Receiver			<i>WILL BE INTIMATED LATER</i>
Frequency Measuring Device			

10. If appeared in any of the Amateur Station Operator's Examination If yes, indicate the date of the examination	Yes / No
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DECLARATION

I hereby solemnly declare that the foregoing facts are true and correct and nothing is false therein and nothing material has been concealed there from. I also agree that in case any information given by me hereinbefore is found false at a later date, the licence, if granted, will be cancelled.

I further solemnly give an undertaking that I will not either directly or indirectly divulge to any person except when lawfully authorized or directed to do so, the purpose of any message which I may transmit or receive by means of any Wireless apparatus operated by me or which may come to the knowledge in connection with the operation of said apparatus.

I have carefully read and understood the rules contained in the Indian Wireless Telegraphs (Amateur Service) Rules, 1978 and undertake to abide by them and observe the conditions of the licence. The licensed station shall not be made accessible to any unauthorized person at any time.

Signature of Witness :
Name (in block letters):
Address:

Signature of the Applicant:
Name (in block letters).....
Date:
Place:

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- Note: 1. An attested copy of birth certificate or X Marks card must be accompanied along with the application.
2. Enclose a certificate in support of nationality in the prescribed Performa, indicated in Appendix III Printed in this application from one of the officers listed therein.
3. Two passport size photos signed on the front side (Chest – not on the face) and write name at backside.
4. Four Copies of Personal Details of Applicant.
5. One self-addressed, unstamped envelope of size 27 x 12 Cms for correspondence.

APPENDIX - III NATIONALITY CERTIFICATE

Certifies that I have known Sri / Smt.....
Son / daughter of Srifor the last.....years
and that to the best of my knowledge and belief he / she bears a good moral character. He / She is of
.....Nationality. He / She is not related to me.

Office Address :

.....
Signature & Designation with Office seal
(Seal should be in English / Hindi)

Note: This certificate should be from one of the Officers listed below:

1. Gazetted Officers of Central or State Government.
2. Member of Parliament or State Legislatures.
3. Sub-Divisional Magistrate Officer/
4. Tahsildars / Naib / Dy.Tahsildars authorized to exercise magistral powers.
5. Principal / Head Masters / Head Mistress of the recognized institutions (School / College) if applicant is a Bondafide student of that institution.

PERSONAL DETAILS OF THE APPLICANT
(TO BE SENT IN QUADRUPPLICATE ON SEPARATE SHEET) IN BLOCK LETTERS

1. Name in full

2. Date of Birth: Place of Birth:

3. AGE: Years Months

4. Height : Cms

5. Colour of : (i) Eyes : **Black** (ii) Hair: **Black** 6. Complexion: **Fair**

7. Any special peculiarities or marks:

8
Present Address:

9.
Permanent address:

Contact Phone: Residence :

Cell No:

10. Nationality: **INDIAN**

11. Occupation (Major work or Profession) :
For which you receive money or activity
Which occupies the majority of your
time

12 Father`s Name & address:
(if Dead, give last address)

13. Type of licence applied for : **AMATEUR (HAM) RADIO**
GRADE: RESTRICTED

14. Proposed location of Station:

(** write your full name, giving expansion of initials etc.)

Place:
Date :

Signature of the Applicant.
Name of the applicant:: _____