



Nigerian Communications Commission
APPLICATION FOR FREQUENCY ASSIGNMENT
MICROWAVE LINKS
(FORM ENG/01)

NAME OF APPLICANT (COMPANY):

ADDRESS:

.....

FREQUENCY APPLIED FOR [MHz or GHz]:

STATE(S) OF THE FEDERATION:

DATE OF APPLICATION:

IMPORTANT INFORMATION

This application should be submitted in triplicate (each bounded) along with the following documents;

1. A copy of the Certificate of incorporation of the company from the Corporate Affairs Commission (CAC).
2. Two (2) passport sized photographs each of Two (2) authorized representatives of the company.
3. The technical details of the proposed equipment(s) as well as the channel plan(s).
4. The EMC Certificate for the proposed equipment(s) or Type Approval Certificate(s) from the country(ies) of origin.
5. A copy of the receipt for processing fee.
6. Schematic of the proposed deployment with explicit locations and addresses.

Section A: Applicant (Company) Details

A1. Applicant Name:

A2. Address:

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A3 Address for correspondence (if different from above):

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A4. Contact Person:

Name:

Telephone:

Fax:

E-mail:-

A5. Nature of the applicant's business:

A6. Type of Operational License(s) held:

.....

A7. License No(s):

.....

Section B: Microwave Stations and Link(s)
Information

B1. Stations and Links Information for Proposed Microwave Link(s):

1. Is this frequency assignment sought for

Temporary Use (Less Than 3 months)

Or

Long-Term Use (3 months and above)

2. Please complete **Sheet B2 “PROPOSED MICROWAVE LINK(S)”** of this Form for each microwave link you are applying for. Make additional copies of Sheet B2 if necessary. If you are applying for more than 1 link, use 1 sheet for each link and number each sheet.

Sheet B2: PROPOSED MICROWAVE LINK(S)

Instructions:

*If you are applying for more than one microwave link, please make additional copies of this sheet.
Use 1 sheet for each microwave link and number the sheets serially.*

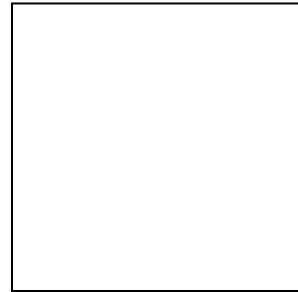
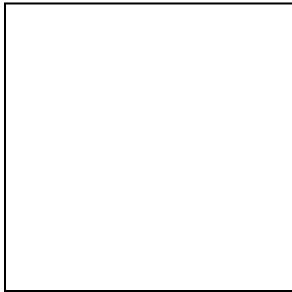
Serial No of Sheet/Link:.....

Parameter	Station A:	Station B:
1. Full Location Address of the Station/Tower. (Street No, City, State)		
2. Station/Tower Name (if any).		
3. Longitude of Station	Deg (E) Min (E) Sec (E)	Deg (E) Min (E) Sec (E)
4. Latitude of Station	Deg (N) Min (N) Sec (N)	Deg (N) Min (N) Sec (N)
5. Height of the Tower/Structure Above Ground Level (AGL) & Above Sea Level (ASL)	AGL (m) ASL (m)	AGL (m) ASL (m)
6. NCAA Authorisation for Tower/Mast (Furnish Ref No)		
7. Height of Antenna: AGL , ASL	AGL (m) ASL (m)	AGL (m) ASL (m)
8. Length of Hop from Station A to B (Km).		
9. EIRP (Watts)		
10. Antenna Characteristics. Antenna Type Antenna Gain Front-to-back ratio. Beamwidth Radiation Pattern Antenna Polarisation.		
11. Direction of antenna (in Degrees East of North)	(Deg E of N)	(Deg E of N)
12. Proposed Transmit/Recieve Frequency (eg 8GHz, 13GHz, 23GHz, etc)		
13. Carrier Spacing Desired.		
14. no of Channels (For N+1 System)		
15. Proposed Data Rate (No of E1s or Mbit/Sec).		
16. BER Objective		
17. Existing or new Tower.		
18. Station Contact Person: Name: Telephone: Fax:		

Section C: Declaration

We, whose photographs and signatures appear below, hereby declare that the information supplied in this Application Form is true in all respects and we hereby sign undertakings that upon assignment of frequency, we shall abide by the terms and conditions upon which the Frequency Authorization/License is granted. We accept that our Frequency Authorization/License may be revoked and appropriate penalty applied if it is found that we have been granted Frequency Authorization/License based on incorrect information furnished to the Commission

Attach two passport sized photograph each of the two authorized representative of the company and company seal.



Name:

Name:

Designation:.....

Designation:

Signature:

Signature:

Section D: Checklist

E1. Please mark **X** in the appropriate box

Has all applicable sections of this form been completed?

Has the declaration been signed?

Has all the documents requested for been enclosed?

Section E: Where to return the application form

F1. Please address the completed form and any attachments to:

The Executive Vice Chairman/ CEO,
Nigerian Communications Commission,
Plot 432 Aguiyi Ironsi Street,
Maitama, P.M.B. 326, Abuja.
Federal Capital Territory
Nigeria.
Telephone: 234-9-4617000
Facsimile: 234-9-4617514
Website: www.ncc.gov.ng

And return directly to the above address or through any of the Commission's Zonal Offices listed in the table below;

<p>Enugu Office No 7, Egerton Street, G.R.A Behind Police Headquarter Adjacent to High-court, Enugu State. Tel: 234-42-250435, 257776 251538, 257629 Fax: 234-42-250435</p>	<p>Ibadan Office No 19, Oshuntokun Avenue Old Bodija, Ibadan, Oyo State. Tel: 234-2-8104303 Fax: 234-2-8103997</p>
<p>Kano Office No. 1, Sokoto Road, By Audu Bako Secretariat, Nasarawa GRA, P.M.B 3212, Kano State. Tel:234-64-947822, 319999 Fax:234-64-328855</p>	<p>Lagos Office 9A Bankole Oki Street, Behind Ikoyi Club, Ikoyi, Lagos. Tel: 234-1-72093224, 2690603, 2690712 Fax: 234-1-2690750</p>
<p>Port Harcourt Office No. 23A, Igbodo Street, Behind First Bank Aba Road, Old GRA, Port Harcourt, Rivers State. Tel: 234-84-233055, 573006 Fax: 234-84-239942</p>	

FOR OFFICIAL USE ONLY

1. Date Application submitted:
2. Frequency Reservation:
3. Date of Notification of Offer:
4. Status of Security Clearance:
5. Payment for License:
6. Receipt No:
7. Date:
8. License No:
9. Validity:
10. Approved Frequency & States:
11. Date of Approval:
12. Payment and Date: