



NIGERIAN COMMUNICATIONS COMMISSION

HIGH ALTITUDE PLATFORM STATION (HAPS) NETWORK FREQUENCY LICENCE APPLICATION FORM

Part 1: General Information

Applicant Information

Name of Company: _____

Company Representative: _____
Last First Middle

Position Held: _____

Company Address: _____
Street Address

City Country/State P.O. Box/Zip Code

Phone number: _____ Email: _____

Fax Telephone number: _____ Country: _____

Part 2: Technical Parameters

HAPS Parameters

TYPE OF HAPS:

Brand (Manufacturer): _____

HAPS Altitude above Ground:

HAP Network Facility Type:

Transmit only: Receive only:
Transmit/Receive: Others: Please specify: _____

HAPS Transmit Parameters

Provide information regarding the proposed Transmitter:

Transmit (Tx) Center Frequency: _____ MHz

Polarization: _____

Bandwidth: _____ MHz

Frequency Range of Operation: From: _____ MHz To: _____ MHz

ITU Class of Emission Designator: _____

Max. EIRP/ Carrier (dBW): _____

Max. EIRP Density per Carrier (dBW/4KHz): _____

HAPS Receive Parameters

Provide information regarding the proposed Receiver:

Receiver (Rx) Center Frequency: _____ MHz

Polarization: _____

Bandwidth of Receive Signal: _____ MHz

Frequency Range of Operation: From: _____ MHz To: _____ MHz

Associated Ground Station (GS) Parameters

Associated GS ID: _____

Associated GS Address: _____

Town/ City: _____

Country: _____

Latitude: Deg: _____ Mins: _____ Secs: _____ N or S *In Decimal:* _____

Longitude: Deg: _____ Mins: _____ Secs: _____ E or W *In Decimal:* _____

Site Elevation, Above Sea Level (ASL):

Associated Space Satellite Parameters

Name of Associated Space Satellite: _____

Name of Satellite Home Administration: _____

Orbital Type of Space Satellite:

Orbital Position of Space Satellite:

Frequency Band of Operation:

Degree E: _____

Degree W: _____

HAPS Deployed Network Parameters

Provide the following information.

HAPS Deployed Network: _____ (TO BE SUBMITTED BI-ANNUALLY IN LINE WITH THE SATELLITE REPORTING TEMPLATE VIA THE URL <https://www.ncc.gov.ng/accessible/documents/824-satellite-services-deployment-reporting-template>)_

Disclaimer and Signature

I certify that the provided information are true and complete.

The grant of an Assignment notwithstanding, I understand that any false or misleading information in my application may result in the Commission withdrawing the said Licence and my forfeiture of whatsoever amount I have paid on account of the Licence.

*Affix Passport
Photograph of
Authorized
Representative*

Signature: _____

Date: _____

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.
4. The EMC Certificate for the proposed equipment and Type Approval Certificate(s) from the Nigerian Communications Commission.
5. A copy of the receipt for processing fee (N 10,000:00)
6. Schematic of the proposed network deployment.

CHECKLIST

Please mark X in the appropriate box:

- Have all applicable sections of this form been completed?
- Has the disclaimer page been signed?
- Have all the documents requested for been enclosed?