



ETHIOPIAN TELECOMMUNICATION AGENCY

Annex I

Private Radiocommunication License Application Form

No. _____

Name of Applicant _____
Nationality _____ Address _____
License required by _____
P.O.Box _____ Telephone _____
Reason for requesting license _____
Requested duration of license _____

PARTICULARS OF RADIO COMMUNICATION EQUIPMENT

Manufacturer	Model	Power	Serial No.	Quantity

LOCATION OF RADIO STATION

TYPE OF STATION

Region	Zone	District	Locality	Base, Mobile

Communication Links with possible configuration	Air Distance (Km)	Frequency	Voice/Data	Type of Antenna	Operating Time

..... Place Date Signature & Stamp
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