



Application Form for Individual License

(If space is insufficient please attach information as Appendices)

Tick (✓) whichever is applicable

1. **Application for:**

Communications Infrastructure and Services Provider (CISP)

Communications Infrastructure Provider

A. National Communications Infrastructure Provider

B. Regional Communications Infrastructure Provider

C. International Communications Infrastructure Provider

APPLICATIONS SERVICE PROVIDERS (ASP) LICENSE

A. Applications Services Providers (ASP) License

B. Mobile Virtual Network Operator (MVNO)

2. Type of Application

A. New Application

B. Renewal Application

Name of Applicant:

Registration Number and type of legal entity registered with Ministry of Commerce and Industries:

Address:

PO Box No:

Street:

State:

3. Contact particulars of two persons namely a Managing Director and the formal contact person of the company who may be contacted for further information:

Name	Position	Telephone No.	Address

4. Company's Applicant website address, if any:

5. Nature of facilities/services to be offered:

INFRASTRUCTURE/SERVICES	STATUS (Complete or Incomplete)	CAPACITY	PLAN/TIMEFRAME	SERVICE AREA (Please Specify)

6. Current spectrum Utilizations (Please attach):

Frequency Band (MHz)	Spectrum Block	Base Station Transmit Frequency (Downlink)		Duplex Type	Mobile Transmit Frequency (Uplink)		Bandwidth (for LTE)	Commencement Date
		From	To		From	To		

Please attach a separate document if you need more space (with official stamp and signature)

7. Current Numbering Resources (MCC, MNC, ISPC):

Mobile Country Code (MCC)	Mobile Network Code (MNC)	Protocol		Operator	Actual Number Range	Forecast
		GSM	LTE/OTHERS			

Please use a separate attachment if needed.

ISPC	Unique Name of the Signaling Point	Name of the Signaling Point Operator

8. Please attached a business Plan including:

- Roll out Plan for networks/services.
- Service Pricing (tariff service).

9. Attach a list of key management personnel including details of:

- Name, title, Email, telephone

10. Attach Additional information in support of application, if any:

11. Declaration:

I am the fully authorized representative of

And I hereby confirm that all the information submitted in this and all related documents for the purpose of this application for an individual license under the National Communications Laws by Article No (41) of 2017 are correct and true.

Signature:

Name:

Designation:

Date:

Stamp:



For NCA Use

