



Spectrum Management Authority
Application for Release of Imported Telecommunications Equipment

Personal Information	
Name of Applicant	
Occupation	
Address	
Name and Address of Importer (if other than applicant)	
E-mail	
Phone	
Fax	
Forms of Identification (*state ID number and expiry date)	Driver's Licence:
	Passport:
	National Voter's Identification:
Equipment Information	
Type and Model of Equipment	
Serial Number (if available)	
Description of intended use	
Location of intended use	
Documents attached to application	

I, _____, hereby declare that all information submitted in favour of this application is true and correct and it is understood that, if it may be demonstrated that any false statements are knowingly made in this application, any authorisation granted pursuant to this application may be revoked.

 Signature of Applicant

 Date

 Witness (Name and Signature)