



HARMFUL INTERFERENCE COMPLAINT FORM

Pre-requisites:

1. Harmful Interference Complaint Form must be submitted by an Authorized/ Licensed Spectrum user, hereby referred to as the Complainant.
2. Preliminary investigation of the interference should be performed to eliminate the interference as an internal source.
3. The complainant should ensure that the equipment is operating within the licensed parameters, without any technical fault.

COMPLAINANT INFORMATION

1.1 Company Name:	1.2 Date of Complaint:
1.3 License /Authorization #:	1.4 Contact Person:
1.5 Phone / Fax No:	1.6 Email:
1.7 Address:	1.8 Technician/Engineer:
	1.9 Technician/Engineer Phone #:
	2.0 Technician/Engineer Email:

DETAILS OF INTERFERED STATION/SITE

2.1 Frequency & Bandwidth:	
2.2 Transmitter Brand & Model:	2.3 Receiver Brand & Model:
2.4 Antenna Brand & Model:	2.5 Antenna Type & Gain:
2.6 Location of Station/Site:	2.7 Coordinates:
2.8 Location(s) of interference being experienced:	
2.9 Impact of Interference:	
3.0 Radio service affected:	<input type="checkbox"/> FM/TV Broadcast <input type="checkbox"/> Aeronautical <input type="checkbox"/> Maritime <input type="checkbox"/> Fixed Wireless <input type="checkbox"/> Cellular
Other service:	

DETAILS OF INTERFERENCE / SOURCE

3.1 Interference Frequency (if known):	3.2 Identity of Interference (if known)
3.3 Nature of Interference:	<input type="checkbox"/> Voice <input type="checkbox"/> Noise <input type="checkbox"/> Cross talk <input type="checkbox"/> Jamming <input type="checkbox"/> Interruption
3.4 Interference Period:	Date: Time: Duration:
3.5 Interference Occurrence:	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Day / Night <input type="checkbox"/> Occasional
3.6 Suspected source of Interference:	

Explain the normal operation of your system:

Explain the operation of your system while being affected by the interference:

Date Interference was first observed:

Please outline below the tests conducted on your system and the results:

DATE	TEST	RESULT

ATTACHMENTS

Spectrum Plot Audio content Interference statistics Other

COMPLAINT SUBMISSION

Please submit completed form along with preliminary investigation results/report by fax or email to:

Monitoring & Inspection Department
Spectrum Management Authority (SMA)
Email (mcc_user@sma.gov.jm AND info@sma.gov.jm), Fax (+876-922-4093)

Signature & Company Stamp:

Date: