



Telecommunications Authority of
Trinidad and Tobago
#5, Eighth Avenue Extension,
Off Twelfth Street,
Barataria

Tel: (868) 675-TATT
Fax: (868) 674- 1055
Email: info@tatt.org.tt
Website: www.tatt.org.tt

AMATEUR RADIO LICENCE APPLICATION FORM Form L2

Instructions:

1. All sections of this form must be completed.
2. This form shall be completed for a Trinidad and Tobago national seeking to apply for an Amateur Licence or a non-national seeking to apply for a Reciprocal Amateur Licence.
3. The submissions checklist below must be accurately completed.

SUBMISSION CHECKLIST

Please ensure that the following have been submitted:

ITEM	DESCRIPTION	CHECK BOX IF SUBMITTED
Form L2	Completed all relevant sections	<input type="checkbox"/>
A	Original and a copy of Trinidad and Tobago's National ID or Passport (for an applicant requesting a Reciprocal Licence, an original and a copy of national Passport)	<input type="checkbox"/>
B	Original and a copy of Amateur Radio Certificate	<input type="checkbox"/>
C	Original and a copy of previous licence (only applicable for holder of a repealed Wireless Telegraphy Ordinance Licence)	<input type="checkbox"/>
D	Original and a copy of a valid Licence issued by another Country (only applicable for an applicant requesting a Reciprocal Licence)	<input type="checkbox"/>

A. GENERAL INFORMATION

Name of Applicant:

Title: _____ First Name: _____ Last Name: _____

Address

Street 1: _____ Street 2: _____

Town/City: _____

Telephone: _____ Fax: _____ Email: _____

Address of Base Station:

Street 1: _____ Street 2: _____

Town/City: _____

Nationality: _____

Individual Club

Name of Club: _____

Certifying Body: _____

New Application Reciprocal Licence **(Must Complete Section B)**

Preferred Call-sign: _____

B. LICENSEE INFORMATION FOR RECIPROCAL APPLICANTS ONLY

Class of Licence: _____

Current Licence issued by:

Name of Agency: _____

Address: _____

Country: _____

Call Sign: _____ Permit Number: _____

Date of Issue: _____ Expiry Date of Licence: _____

Passport number: _____

B. LICENSEE INFORMATION FOR RECIPROCAL APPLICANTS ONLY continued...

Duration of stay in Trinidad and Tobago:

Date From: _____

Date To: _____

Duration of Licence requested:

Date From: _____

Date To: _____

C. EQUIPMENT TECHNICAL SPECIFICATIONS

	Quantity	Make	Model	Serial Number	Date Purchased
Fixed Station(s)	_____	_____	_____	_____	_____
Mobile(s)	_____	_____	_____	_____	_____
Portable(s)	_____	_____	_____	_____	_____
Base Station(s) (Repeaters)	_____	_____	_____	_____	_____

D. DECLARATION AND SIGNATURE

I, the undersigned, do hereby declare that the information provided in this application is correct and accurate to the best of my knowledge. I acknowledge and agree that submitting an application to the Telecommunications Authority of Trinidad and Tobago does not mean that a licence will be granted, and that consideration of this application is a matter for the exercise of the Authority's discretion acting in accordance with the Telecommunications Act, 2001. If the licence is granted, I am fully aware of all the obligations and conditions associated with the licence. I understand that in processing this application, the Authority may undertake such investigations as it considers appropriate to verify the information submitted and/or to assess the background or suitability of any person involved or to be involved in any permission or authorisation hereby applied for, and I hereby expressly consent for myself and on behalf of the applicant(s) and all such persons, to the carrying out by the Authority of such investigations. I confirm that I am duly authorised by all the relevant persons to make this declaration.

Applicant

Title: _____ First Name: _____

Last Name: _____

Signature _____

Date: _____