



VSAT APPLICATION FORM

A. Applicant Information

Applicant Name:		Telephone number:
Physical Address:		E- mail:
City:	District:	Region:

B. Operations Address

Operator Name:		Phone Number:
Operator Company/ Agency Name:		
Country of registry of this MES (Mobile Earth station):		
City:	District/Region:	17. Country:

C. Nature of Service

This application is for a license to operate a satellite system in the service shown (tick one):

- ☐ Inmarsat - A ☐ Inmarsat - B ☐ Inmarsat - C ☐ Inmarsat - M
☐ Inmarsat-phone Mini-M ☐ Ground Earth Station
☐ Transportable Satellite Transceiver
☐ Tracking Telemetry & command (TT & C) Earth Station
☐ Cross border Private V-SAT
☐ Domestic Private V-SAT
☐ Domestic Commercial V-SAT
☐ Cross border Commercial V-SAT
☐ Receive Only V-SAT Operator
☐ V-SAT terminal for Radio determination Services V-SAT Terminal for Space Research related services
☐ V-SAT Terminal for Amateur related services

D. Site Data (Location of the Earth Satellite)

Site Number:	Site Name:			
Location Place Name:				
Location coordinates:	Longitude:	Deg	Min	Secs
	Latitude:	Deg	Min	Secs
	Region:			
Site Elevation (meters AMSL):				
Remarks:				

E. Transmitter Equipment Data

Manufacturer name:	Model:	Serial Number:
Transmitter: Power (watts)	Effective Radiated Power (watts)	
Equipment Manual Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Station Class:		
Remarks:		

D. Antenna Data

Manufacturer Name:			Model:	
Height above ground (meters):	Polarization:	Directional:	Circular:	Other

E. Frequency Data

Frequency Band:	Date of Issue:	Date of Renewal:
Emission:	Tolerance:	

DECLARATION

I,-----
(Print name)

declare that the information given in this application form is true and correct.

SIGNATURE

DATE

OFFICIAL STAMP