



Name of customer	Customer number
Local address	Business Identity Code -
Postcode and post office	Telephone ()
Person in charge	Telefax ()
Additional information (e.g. billing address, if not the address above)	Telephone ()
	E-mail address
<input type="checkbox"/> Appendix	

Information on the radio transmitter (Geographical area of use of transportable stations to be clarified under "Local address")

<input type="checkbox"/> First time application	<input type="checkbox"/> Amend-ment:	Present hop code and the related licence No.	Frequency reservation number
Manufacturer and type of equipment			Frequency range
Transmitter power (dBm) at antenna connector	<input type="checkbox"/> analogue	Bandwidth (MHz)	Modulation (e.g. FM)
Diversity, if in use	<input type="checkbox"/> digital	Transmission capacity (Mbit/s)	Modulation (e.g. 4PSK)
<input type="checkbox"/> Place <input type="checkbox"/> Frequency <input type="checkbox"/> Other			

Information on the location of the antennas

(If the mast site is new or if the mast code is not known, please attach a map where the mast site is indicated.)

Station 1		Station 2	
Mast code (if known)	<input type="checkbox"/> New, please attach map	Length of link hop (km)	Mast code (if known) <input type="checkbox"/> New, please attach map
Coordinates (E)	Coordinates (N)	Coordinates (E)	Coordinates (N)
Local address, municipality	Height of ground level (m)	Local address, municipality	Height of ground level (m)
	Mast height (m)		Mast height (m)
Detailed information on the mast site (e.g. water tower, chimney) and owner		Detailed information on the mast site (e.g. water tower, chimney) and owner	

Technical details on the antennas (If needed, please attach the antenna radiation pattern)

Station 1		Station 2	
Manufacturer and type of antenna		Manufacturer and type of antenna	
Height of antenna above ground level (m)	Antenna diameter and gain (dBi)	Height of antenna above ground level (m)	Antenna diameter and gain (dBi)
Max. radiation direction in degrees	Front-to-back ratio of antenna (dB)	Max. radiation direction in degrees	Front-to-back ratio of antenna (dB)
<input type="checkbox"/> Parabolic <input type="checkbox"/> Omnidirectional	Attenuations	<input type="checkbox"/> Parabolic <input type="checkbox"/> Omnidirectional	Attenuations
<input type="checkbox"/> Other?		<input type="checkbox"/> Other?	
Additional information (e.g. preferred period of validity)			
Place and date		Applicant's signature and name in block letters	
<input type="checkbox"/> Appendix			

Ficora's notes

Transmitter channel	Transmitter frequency	Receiver frequency	Polarization <input type="checkbox"/> Ver <input type="checkbox"/> Hor <input type="checkbox"/> Other
---------------------	-----------------------	--------------------	--