



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

Tel: (868) 675-8288
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 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C	Original and a copy of previous licence (only applicable for holder of a repealed Wireless Telegraphy Ordinance Licence)	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:	
Address:	
Telephone:	Fax: email:
Address of Base Station:	
Nationality:	
<input type="checkbox"/> Individual	<input type="checkbox"/> Club
Name of club:	
Certifying Body:	
<input type="checkbox"/> New Application Preferred Call-sign: _____	<input type="checkbox"/> Reciprocal Licence (Must Complete Section B)

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:	
Duration of stay in Trinidad and Tobago:	
Date From:	Date To:
Duration of Licence requested	
Date From:	Date To:

D. EQUIPMENT TECHNICAL SPECIFICATIONS					
	Quantity	Make	Model	Serial Number	Date purchased
Fixed Station(s)					
Mobile(s)					
Portable(s)					
Base Station(s) (Repeaters)					

E. 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's Name (BLOCK Letters):

Signature:

Date: