



Suruhanjaya Komunikasi dan Multimedia Malaysia

Malaysian Communications and Multimedia Commission

MCMC Tower 1, Jalan Impact, Cyber 6
63000 Cyberjaya, Selangor Darul Ehsan

Tel: 6 03-86888000 Fax: 6 03-86881000 <http://www.mcmc.gov.my>

APPLICATION FOR APPARATUS ASSIGNMENT(S) (RADIODETERMINATION SERVICE)

<input type="checkbox"/> New apparatus		<input type="checkbox"/> Type of apparatus (Please refer to instructions):			
<input type="checkbox"/> Existing apparatus	Client ID no.:		Assignment no.(s):		Callsign:

Application Fee
RM60
per application

To be used when applying for radiodetermination service apparatus assignment (s)

1. CLIENT INFORMATION

Organisation name:					
Applicant name:					
Business / Residential address:					
Town / State:				Postal code:	
Billing address: (if different from above)				Postal code:	
Telephone (office/home):		Fax:		E-mail:	
Contact person:				Company / Business reg. no.:	
Nature of business:				IC no.:	

2. APPLICATION INFORMATION

Proposed use of system / System description:					
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3. GEOGRAPHIC AREA INFORMATION

Location name:					
Site address:					
Town / State:				Postal code:	
Apparatus name:			Ground elevation: (metres above mean sea level)		
Geographic area of operations:			Coverage radius (km):		
Centre of area of operations Latitude (°N):	-- ° -- ' -- "		Longitude (°E):	-- ° -- ' -- "	
Structure height (m):			Building height (m):		

4. FREQUENCY INFORMATION

Desired transmit frequency (MHz):		Desired receive frequency (MHz):	
Communication desired with:			
Desired transmit frequency (MHz):		Desired receive frequency (MHz):	
Communication desired with:			
Bandwidth (MHz):		Emission:	

5. APPARATUS INFORMATION

Manufacturer (Transmitter):		Model (Transmitter) / Serial no.:	
Manufacturer (Receiver):		Model (Receiver) / Serial no.:	
Transmitter power (watts):		Type approval no.:	

6. DO YOU HAVE A LICENCE / ASSIGNMENT UNDER THE COMMUNICATIONS AND MULTIMEDIA ACT 1998? IF SO, PLEASE PROVIDE DETAILS OR A COPY OF YOUR LICENCE / ASSIGNMENT.

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7. PLEASE STATE THE REQUIRED VALIDITY DATE AND PERIOD.

Date:	Date assignment is issued OR Date required _____ (Please state the date)
Period (from 3 months to 1 year):	

8. I CERTIFY THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE, THE APPARATUS IS TYPE APPROVED FOR USE IN MALAYSIA AND IT WILL BE USED ONLY FOR THE PURPOSES AUTHORIZED BY THE MINISTER OF COMMUNICATIONS AND MULTIMEDIA MALAYSIA.

Signature:		Date:	
Name of signatory:		I.C. no.:	
Business / Company stamp:			

Note: Please enclose the following:

1. A letter using the company, agency or organization's letter head and describe the purpose of application and its usage;
2. Copy of applicant's identification card;
3. Certified true copy of the company registration (for non-government applicant only);
4. Equipment technical specification such (as equipment product brochure or pamphlet); and
5. A copy of approval letter from DCA on the use of frequency for Non-Directional Beacon (NDB) application.

FOR MCMC USE ONLY

Fee paid:	
Cheque or Bank in slip no.:	
Receipt no. / date:	
Spectrum Plan checked:	

INSTRUCTIONS ON COMPLETING THE FORM

1. INTENT

- 1.1 The intent of this document is to provide applicants with instructions to assist them in properly completing the APPARATUS ASSIGNMENT(S) RADIODETERMINATION SERVICE FORM.
- 1.2 The RADIODETERMINATION SERVICE FORM is to be completed by the applicant and submitted to the Malaysian Communications and Multimedia Commission office for the following types of mobile service apparatus:-
 - 1) *Radiodetermination Station*
 - 2) *Radionavigation Station*
 - 3) *Radiolocation Station*
- 1.3 Please complete one RADIODETERMINATION SERVICE FORM per station. A station is defined as being one or more transmitter, receivers, or a combination both belonging to a single application at a location identified by one set of geographical coordinates.
- 1.4 Application Fee is **RM60.00** per application (for non-government applicant only).
- 1.5 The applicants are requested to submit the annual fee associated with the services for which you are applying along with the application. Assignments will not be issued until full payments of all appropriate fees have been received.
- 1.6 Cheques, postal orders or money orders should be made payable to the “**Suruhanjaya Komunikasi dan Multimedia Malaysia**” or by online payment through MCMC’s website at www.mcmc.gov.my.
- 1.7 Print clearly – illegible, unclear or incomplete application forms may delay processing.

2. PROCEDURES

Each application contains 8 sections which can be selected according to the services.

- Section 1 for client information*
- Section 2 for application information*
- Section 3 for geographical area information*
- Section 4 for frequency information*
- Section 5 for apparatus information*
- Section 6 for comments and remarks*
- Section 7 for validity date and period*
- Section 8 for the applicant’s certification & signature*

2.1 New Apparatus

If the application is for a new station, i.e. the applicant does not already have any licensed transmitters or receivers at the location, please indicate this by checking the “New apparatus” box. NOTE: if the client has existing license(s) / assignment(s), then the client ID number field should be completed to assist MCMC staff in locating the applicant’s information.

2.2 Change to Existing Apparatus Assignment

Please indicate if the application is for a change in an existing apparatus assignment, such as a change of frequency, the addition of new frequency or a change of location. Please indicate this by checking the “Existing apparatus” box, entering the client ID number, the assignment number, and the callsign, found on the existing license / assignment, in the appropriate fields on the form.

2.3 Client Information

This section requests particular information on the applicant (individual, business or company).

2.3.1 Addresses

Please indicate your Business / Residential address for assignments and other correspondence. Please indicate if a separate address is needed for all billing correspondence.

2.3.2 Contact

This section informs MCMC on how and who to contact for more information on the application to avoid any delay.

2.4 Application Information

This section requests information on the proposed use of the apparatus or system and a brief description of the actual system. If more space is required, please provide attachment.

2.5 Geographic Area Information

The information requested in this section pertains to the physical characteristics of the location of the apparatus.

2.6 Frequency Information

Please enter the frequency on which communications are desired.

2.6.1 Bandwidth and Emission

Please complete the necessary bandwidth and emission of the transmitter equipment. This data may not be readily available, in which case the applicant should contact its supplier.

2.7 Coverage Information

This section requests the applicant to complete the appropriate fields depending on the type of system for which the applicant is applying.

2.8 Apparatus Information

Please provide information on the make, model and serial number of the transmitter, receiver, or transceiver being employed at the station. Included are fields requesting the transmitter output power and type approval number. Please attach technical specifications and brochure of the equipment.

2.9 Comments / Remarks

Please provide details existing license/assignment(s) under the Communications and Multimedia Act 1998. Please enter any comments or remarks that may assist MCMC in processing the application in an efficient manner. If required, please provide attachments.

2.10 Certification and Signature

Please READ CAREFULLY the certification, sign and date the form where indicated, the name and I.C. number of the signatory should be PRINTED clearly where indicated, and the business or company chop should be placed at the bottom of the page.