

Application form for import or use of satellite phones

Name of the individual/organization:		
Address:		
Details of the Applicant;		
Name of an applicant :	Designation:	Nationality:
CID/Passport No:	Date of issue:	Date of expiry:
Mobile No :	Telephone No: Fax No:	Email ID:
Details of the Contact person:		
Name of the contact person:	Designation:	Nationality:
CID/Passport No:	Date of issue :	Date of expiry:
Mobile No:	Telephone No: Fax No:	Email ID:
Letter of concern from the relevant Agency		
Please tick one: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Purpose of use :		
Details of satellite Phone :	Type: Model Number: SIM number: IMEI number:	
Frequency range :		
Period of utilization:		
Name of the Satellite phone service providers with address and contact details.		

Name:

Seal of the organization

Signature of the applicant

Date of application:

Letter of undertaking

I/We (Name of the head of the organization) of
.....(Name of the organization) do hereby declare and
undertake;

1. That all information provided in the application are true and correct to the best of my knowledge and that the satellite phone shall be utilized as per the guideline provided by the Authority.

2. To inform and update the Authority on any change in the type of satellite phone as well as other information as and when required by the Authority.

Name:

Seal of Head of the organization

Signature

Date: