

TELECOMMUNICATIONS AUTHORITY OF FIJI

Level 2, LICI House, 11 Butt Street, Suva. G.P.O Box 13413, Suva, Fiji Phone: (679) 3310101 Fax: (679) 3310110 www.taf.org.fj contact@taf.org.fj

Application Form for Annual Maritime Station Survey

TAF 2002

No	Information	Further description	Information concerning Applicant
1	Name of Applicant	Individual, Company, Partnership, Unincorporated Association, Other (specify)	
2	Status of Applicant	Individual, Company, Partnership, Unincorporated Association, Other (specify)	
3	Residency of Applicant	If an individual	
4	Citizenship of Applicant	If an individual	
5	Business Registration Number	If applicable	
6	Date and place of incorporation	If a company	
7	Registered address	If a company	
8	Name of Vessel	The trading name that the vessel is known as	
9	Place where vessel is moored	Location where survey will take place	
10	Area of vessel operation	Location where the vessel is used	
11	Date of expiry of current license		
12	Contact details of Applicant	Name Telephone / Mobile No. Business Fax No. Email address	
13	Payment of application fee	Details of receipt and amount	
14	Signed with signatory's name and position	Enter details	
15	Date of Application	Enter date	
16	Acknowledgement of receipt of application (for official use)	Date and reference	

17	Received by authorised officer of the Authority (for official use)	Signature	
		Name and Position	
		Date	