

TELECOMMUNICATIONS AUTHORITY OF FIJI

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Application Form for Equipment Type Approval

TAF 2001

No	Information	Further description	Information concerning Applicant
1	Name of Applicant:	Individual, Company, Agent, Other (specify)	
2	Status of Applicant:	Individual, Company, Agent, Other (specify)	
3	Date and place of incorporation:	If a company, agent, other (specify)	
4	Registered address:	If a company, agent, other (specify)	
5	Address of Applicant:	Street address	
		Postal address	
6	Contact details of Applicant:	Name	
		Telephone / Mobile No.	
		Business Fax No.	
		Email address	
7	Contact person (if other than the Applicant):	Name	
		Telephone / Mobile No.	
		Business Fax No.	
		Email address	
8	Technical requirements:	Detail description of technical information of equipment including: All technical documentations of equipment in soft/hard copy Power of attorney from equipment manufacturer to TA agent Declaration of equipment conformity to international standards Certificate of equipment conformity to such standards Equipment test reports from FCC or CE	

		<p>or Australia or ITU recognized/test laboratories.</p> <p>Type approval certifications from Australia and/or New Zealand, FCC and/or CE</p>	
9	Payment of application fee	<p>Details of payment and amount to the below information:</p> <p>Account name: Telecommunications Authority of Fiji</p> <p>Account number: 05-9002-7682600</p> <p>Bank Name: Bank South Pacific</p> <p>SWIFT Code: BSOPFJFJ</p> <p>Fees: outlined on schedule of fees</p>	
10	Signed with signatory's name and position	Enter details	
11	Date of Application	Enter date	
12	Acknowledgement of receipt of application (for official use)	Date and reference	
13	Received by authorised officer of the Authority (for official use)	Signature	
		Name and Position	
		Date	