

TELECOMMUNICATIONS AUTHORITY OF FIJI

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Application Form for Aeronautical Radio License

TAF 2005

No	Information	Further description	Information concerning Applicant
1	Name of Applicant:	Please provide details.	
2	Contact Details of Applicant:	Telephone / Mobile No:	
		Fax No:	
		Email Address:	
		Postal Address:	
3	Registered Address:	Please provide company name and location.	
4	Business Registration Number:	If applicable	
5	Description of items:	Please provide details of radio equipments – preferably CAAF Approval of Radio Installation Certificate.	
6	Payment of application fee:	Details of receipt and amount	
7	Signed with signatory's name and position	Enter details	
8	Date of Application:	Enter date	
9	Acknowledgement of receipt of application (for official use)	Date and reference	
10	Received by authorised officer of the Authority (for official use)	Signature	
		Name and Position	
		Date	