

### **GOVERNMENT GAZETTE**

### OF THE

### REPUBLIC OF NAMIBIA

N\$15.60 WINDHOEK - 22 May 2013 No. 5197

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.

#### **General Notice**

#### COMMUNICATIONS REGULATORY AUTHORITY OF NAMIBIA

No. 155

### NOTICE OF INTENTION TO MAKE REGULATIONS PRESCRIBING FORMS FOR APPLICATIONS: COMMUNICATIONS ACT, 2009

The Communications Regulatory Authority of Namibia, in terms of regulation 4(3) of the Regulations Regarding Rule-Making Procedures published in General Notice No. 334 of 17 December 2010 publishes this Notice of Intention to make Regulations Prescribing Forms for Applications, which contains the following:

- 1. A draft of the proposed amended Regulations as set out in Schedule 1;
- 2. A concise statement of the purpose for the proposed amended Regulations as set out in Schedule 2.

The public may make oral submissions on the proposed regulations to the Authority, at a time, date and place notified by the Authority by subsequent notice in the *Gazette*.

The public may also make written submissions to the Authority within thirty (30) days from the date of publication of this notice in the *Gazette*, in the manner set out below for making written submissions.

Reply comments to written submissions may be submitted to the Authority-

- (a) within a period of fourteen (14) days from the date of notification of written comments by the Authority; or
- (b) If the opportunity for the submission of reply comments is published in a subsequent Gazette, after the lapse of fourteen (14) days from the date of such publication.

All written submissions must -

- (a) contain the name and contact details of the person making the written submissions and the name and contact details of the person for whom the written submission is made, if different; and
- (b) be clear and concise.

All written submission must send or given in any of the following manner:

- (a) by hand to the head offices of the Authority, namely Communication House, 56 Robert Mugabe Avenue, Windhoek;
- (b) by post to the head offices of the Authority, namely Private Bag 13309, Windhoek 9000;
- (c) by electronic mail to the following address: <a href="legal@cran.na">legal@cran.na</a>; and
- (d) by facsimile to the following facsimile number: +264 61 222490.

## L. N. JACOBS CHAIRPERSON OF THE BOARD COMMUNICATIONS REGULATORY AUTHORITY

#### **SCHEDULE 1**

### PROPOSED REGULATIONS PRESCRIBING FORMS FOR APPLICATIONS: COMMUNICATIONS ACT, 2009

The Communications Regulatory Authority, in terms of section 129 of the Communications Act, 2009 (Act No. 8 of 2009) prescribes the forms for applications made to the Authority as set out in the Schedule.

#### **Definitions**

1. In these regulations, a word or expression to which a meaning is assigned in the Act has the same meaning, unless the context otherwise indicates, and -

"Act" means the Communications Act, 2009 (Act No. 8 of 2009);

"the Regulations" means the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences published in General Notice No. 272 of 29 August 2011, as amended by General Notice No. 74 of 13 March 2013.

#### Application form for any category of telecommunications service licence

2. An application for any category of telecommunications service licence, including a class telecommunication service licence referred to in regulation 4 of the Regulations must be made on a form that substantially corresponds to Form CRAN1 set out in Annexure 1."

#### Application form for any category of broadcasting service licence

3. An application for any category of broadcasting service licence referred to in regulation 5 of the Regulations must be made on a form that substantially corresponds to Form CRAN2 set out in Annexure 2.

#### **Application form for spectrum use licence**

4. An application for a spectrum use licence referred to in regulation 6 of the Regulations must be made on a form that substantially corresponds to Form CRAN3 set out in Annexure 3.

### Application form in respect of the transfer of a licence or the transfer of the control of a licence for any category of telecommunications service licences

5. An application for the transfer of a licence or the transfer of the control of a licence for any category of telecommunications service licence referred to in regulation 7 of the Regulations must be made on a form that substantially corresponds to Form CRAN4 set out in Annexure 4.

### Application form in respect of the transfer of a licence or the transfer of the control of a licence for any category of broadcasting service licences

6. An application for the transfer of a licence or the transfer of the control of a licence for any category of broadcasting service licence referred to in regulation 7 of the Regulations must be made on a form that substantially corresponds to Form CRAN5 set out in Annexure 5.

### Application form in respect of the transfer of a licence or the transfer of the control of a spectrum use licence

7. An application for the transfer of a licence or the transfer of the control of a licence for a spectrum use licence referred to in regulation 7 of the Regulations must be made on a form that substantially corresponds to Form CRAN6 set out in Annexure 6.

#### **Application form for amendment of a licence**

8. An application for the amendment of a telecommunications service licence, broadcasting service licence or spectrum use licence referred to in regulation 8 of the Regulations must be made on a form that substantially corresponds to Form CRAN7 set out in Annexure 7.

#### Application form for renewal of a licence

9. An application for the renewal of a telecommunications service licence, broadcasting service licence or spectrum use licence referred to in regulation 9 of the Regulations must be made on a form that substantially corresponds to Form CRAN8 set out in Annexure 8.

#### Application form for withdrawal of a licence

10. An application for the withdrawal of a telecommunications service licence, broadcasting service licence or spectrum use licence referred to in regulation 10 of the Regulations must be made on a form that substantially corresponds to Form CRAN9 set out in Annexure 9.

#### **Application form for Aeronautical services**

11. An application for a spectrum use licence for aeronautical services referred to in regulation 6 of the Regulations must be made on a form that substantially corresponds to Form CRAN10 set out in Annexure 10.

#### **Application form for Maritime services**

12. An application for a spectrum use licence for maritime services referred to in regulation 6 of the Regulations must be made on a form that substantially corresponds to Form CRAN11 set out in Annexure 11.

#### Repeal of regulations

13. The Publication of Forms Regulations, 2011, promulgated by General Notice No. 131 of 18 May 2011, are repealed.

#### **Annexure 1- Form CRAN1**

#### **Application Form: Telecommunications Service Licence**

In terms of Regulation 4 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, a person intending to provide a class telecommunications service is required to complete this application for a class telecommunications service licence.

After completing the form, sign it and submit it to the Authority as required by Regulation 4, along with the relevant application fee or proof that the application fee has been paid to the Authority.

	ficial names)		
ID or Registration Nu			
	11		
CONTACT PERSO	N		
Contact Person (full a	and official names)		
Physical Address	ind official names)		
Postal Address			
Telephone number(s)			
Facsimile number(s)			
Electronic mail addre	ss(es)		
OWNERSHIP INTE	KESTS		
Owner Name	Percentage o	f Overarchin	Nationality of Owner
Owner Name	reiceittage 0	1 Ownership	Ivationality of Owner
FOREIGN OWNER	SHIP INTEREST	S:	
Provide full details r	egarding foreign o	wnership inter	ests in the licence, if any.
	A CC TEL ECOM	MINICATION	
			S SERVICE LICENCE:
			S SERVICE LICENCE: ce for which you are applyin

F.	SERVICES TO BE PROVIDED: Set out a complete, accurate and concise statement of the telecommunications services you intend to provide, including a description and diagram of any envisaged network to be operated, constructed or used.
C	ANY OTHER INCORMATION. Provide any other information you believe might be
G.	ANY OTHER INFORMATION: Provide any other information you believe might be relevant to the Authority in considering this application.
PLEAS	E NOTE:
•	Certified copies of the Identity documents of the Applicant and contact person should
•	accompany this Application Form; If an authorized agent completes the Application on behalf of the Applicant, such agent should submit, with the Application Form, a power of attorney, which authorizes him or her
•	to lodge the application on behalf of the applicant; Please provide copies of registration documents in the event that the Applicant is a juristic
•	person.  The Authority may request further information or documentation, which must be provided to the Authority in the time and the manner set out by the Authority.
Signed	by at in his/her
capacity	ranting that the information provided herein is true and correct, on the day of
	ranting that the information provided herein is true and correct, on the day of, 20
Signatu	re
ACKNO	OWLEDGEMENT OF RECEIPT BY CRAN
Name	
Date	
Place	
Signatu	re

#### **Annexure 2- Form CRAN2**

#### **Application Form: Broadcasting Service Licence**

In terms of Section 85 (4) of the Communications Act, Act No. 8 of 2009 read with Regulation 5 of the "Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences published in General Notice No. 272 of 29 August 2011, a person intending to provide a broadcasting service is required to complete this application for a broadcasting service licence.

ID or Registration Number of Applicant  CONTACT PERSON  Contact Person (full and official names) Physical Address Postal Address Telephone number(s) Facsimile number (s) Electronic mail address(es)  OWNERSHIP INTERESTS  Owner Name Percentage of Ownership Nationality of O	CONTACT PERSON  Contact Person (full and official names) Physical Address Postal Address Telephone number(s) Facsimile number (s) Electronic mail address(es)  DWNERSHIP INTERESTS	CONTACT PERSON  Contact Person (full and official names) Physical Address Postal Address	Applicant	
Contact Person (full and official names)  Physical Address  Postal Address  Telephone number(s)  Facsimile number (s)  Electronic mail address(es)  OWNERSHIP INTERESTS	Contact Person (full and official names)  Physical Address  Postal Address  Telephone number(s)  Facsimile number (s)  Electronic mail address(es)  DWNERSHIP INTERESTS	Contact Person (full and official names) Physical Address Postal Address		
(full and official names) Physical Address Postal Address Telephone number(s) Facsimile number (s) Electronic mail address(es)  OWNERSHIP INTERESTS	(full and official names)  Physical Address  Postal Address  Telephone number(s)  Facsimile number (s)  Electronic mail address(es)  DWNERSHIP INTERESTS	(full and official names) Physical Address Postal Address		
Postal Address  Telephone number(s)  Facsimile number (s)  Electronic mail address(es)  OWNERSHIP INTERESTS	Postal Address Telephone number(s) Facsimile number (s) Electronic mail address(es)  DWNERSHIP INTERESTS	Postal Address		
Telephone number(s) Facsimile number (s) Electronic mail address(es)  OWNERSHIP INTERESTS	Telephone number(s) Facsimile number (s) Electronic mail address(es)  OWNERSHIP INTERESTS			
Facsimile number (s) Electronic mail address(es) OWNERSHIP INTERESTS	Facsimile number (s)  Electronic mail address(es)  OWNERSHIP INTERESTS	Telephone number(s)		
Electronic mail address(es)  OWNERSHIP INTERESTS	Electronic mail address(es)  OWNERSHIP INTERESTS			
OWNERSHIP INTERESTS	OWNERSHIP INTERESTS	Facsimile number (s)		
		Electronic mail address(es)		
			Percentage of Ownership	Nationality of Own
		rovide full details regarding	foreign ownership interest in	the licence, in any.
FOREIGN OWNERSHIP INTERESTS Provide full details regarding foreign ownership interest in the licence, in any.	rovide full details regarding foreign ownership interest in the licence, in any.			
	Provide full details regarding foreign ownership interest in the licence, in any.			
	Provide full details regarding foreign ownership interest in the licence, in any.			
	Provide full details regarding foreign ownership interest in the licence, in any.			

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H	RUARII	OF DIRECTOR	•

If the applicant is a juristic person(s), set out the full names, nationalities and identity number
of the members of the Board of Directors or other governing body.

Director Name	Nationality	Identity Number

F.	CATEGORY OF BROADCASTING SERVICE LICENCE APPLIED FOR
	Identify the type of broadcasting service licence for which you are applying.

Commercial Broadcasting Service	
Community Broadcasting Service	
Public Broadcasting Service	
Signal Distribution	
Class Comprehensive Signal Distribution and Multiplex Broadcasting Service	
Multiplex Broadcasting Service	
Signal Distribution	

#### G. SIGNAL DISTRIBUTION

#### H. SPECTRUM USE

If this application is for a commercial, community or public broadcasting service licence
indicate whether the applicant intends to use spectrum in the provision of broadcasting
service, and if so, ensure that an application for spectrum use licence is simultaneously
submitted to the Authority.

	SERVICES TO BE PROVIDED
	Set out a complete, accurate and concise statement of the broadcasting services you intend to provide.
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I	PROGRAM SCHEDULE
I	If this application is for a commercial, community, or public broadcasting service licence, set out a proposed program schedule detailing the daily transmission time allocated to different program types.
ŀ	orogram types.
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l	FINANCIAL RESOURCES  Attach a statement of accounts setting out the financial resources available to the applicant in relation to the broadcasting service licence applied for.
I	EXPERTISE AND EXPERIENCE
	Attach a concise statement of expertise and experience of the applicant.
	CO-OWNERSHIP DETAILS Indicate full details of any ownership interest held in existing broadcasting services licences
8	and other broadcasting service licence applications by the applicant and if the applicant is a
J	juristic person, by persons who hold ownership interest in the applicant.
Γ	
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N.	ANY OTHER INFORMATION					
	Provide any other information you believe might be relevant to the Authority in considering					
	this application.					
PLEA	EASE NOTE:					
•	Certified copies of the Identity documents of the Applicant and	nd contact person should				
	accompany this Application Form;					
•		If an authorized agent completes the Application on behalf of the Applicant, such agent				
	should submit, with the Application Form, a power of attorney, w	hich authorizes him or her				
	to lodge the application on behalf of the applicant; Please provide copies of registration documents in the event that	the Applicant is a juristic				
•	person.	the Applicant is a juristic				
•	The Authority may request further information or documentation,	which must be provided to				
	the Authority in the time and the manner set out by the Authority.	which must be provided to				
	the Authority in the time and the mainler set out by the Authority.					
Signed	gned byatatat					
iı	in his/her capacity as	, duly authorised and				
	arranting such authority and warranting that the information provided he	rein is true and correct, on				
the	e day of 20					
Signat	gnature					
218114	5					
ACKN	CKNOWLEDGEMENT OF RECEIPT BY CRAN					
Name	ame					
Date	ate					
Place	lace					
Signa	ignature					

#### **Annexure 3 - Form CRAN3**

#### **Application Form: Spectrum Use Licence**

In terms of Regulation 6 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, any person intending to use spectrum must submit an application in this form.

After completing the form, sign it and submit it to the Authority as required by Regulation 6.

Licensee			
ID or Registration Number of	Licensee		
CONTACT PERSON			
Contact Person (full and official	al names)		
Physical Address			
Postal Address			
Telephone number(s)			
Facsimile number(s)			
Electronic mail address(es)			
OWNERSHIP INTERESTS Reproduce the table above an	nd comple	te it for each owner when the entage of Ownership	no is a juristic person  Nationality of Own
Reproduce the table above an	nd comple		
Owner Name  Owner Name  RADIO FREQUENCIES AF List the radio frequencies or	PPLIED FO	entage of Ownership OR:	Nationality of Own
Owner Name  RADIO FREQUENCIES AF	PPLIED FO	entage of Ownership OR:	Nationality of Own
Owner Name  Owner Name  RADIO FREQUENCIES AF List the radio frequencies or	PPLIED FO	entage of Ownership OR:	Nationality of Own
Owner Name  Owner Name  RADIO FREQUENCIES AF List the radio frequencies or	PPLIED FO	entage of Ownership OR:	Nationality of Own
Owner Name  Owner Name  RADIO FREQUENCIES AF List the radio frequencies or	PPLIED FO	entage of Ownership OR:	Nationality of Own
Owner Name  Owner Name  RADIO FREQUENCIES AF List the radio frequencies or	PPLIED FO	entage of Ownership OR:	Nationality of Own
Owner Name  Owner Name  RADIO FREQUENCIES AF List the radio frequencies or	PPLIED FO	entage of Ownership OR:	Nationality of Own

- E
- Identify the type of telecommunications service licence for which the spectrum use licence 1. is applied for:

Class ECS	
Class ECNS	
Class Comprehensive telecommunications service licence (ECS and ECNS)	

Identify the type of broadcasting service licence for which the spectrum use licence is applied

2.

Commercial Broadcasting Service	
Community Broadcasting Service	
Public Broadcasting Service	
Signal Distribution	
Class Comprehensive Signal Distribtion and Multiplex Broadcasting Ser	
Multiplex Broadcasting Service	
icence is applied for:  Private ECNS/ECS network	e provided without a licence for which the spe
Resale of ECNS/ECS	
Non-profit ECNS/ECS	
Amateur service	
Navigation and radar system service	:
Alarm system service	
Emergency response system service	
Citizen band service	
et out a complete, accurate and	
SERVICES INTENDED TO BE INTENDED TO	PROVIDED concise statement of the services intended to b
Set out a complete, accurate and o	
Set out a complete, accurate and o	
Set out a complete, accurate and ousing the spectrum applied for:  FECHNICAL PORTION	concise statement of the services intended to b
Set out a complete, accurate and ousing the spectrum applied for:  TECHNICAL PORTION  Complete the relevant part(s):	concise statement of the services intended to b
Set out a complete, accurate and ousing the spectrum applied for:  TECHNICAL PORTION  Complete the relevant part(s):	concise statement of the services intended to b
Set out a complete, accurate and cusing the spectrum applied for:  FECHNICAL PORTION  Complete the relevant part(s):  Indicate the transmission medium	(s) (e.g. terrestrial, satellite, etc.)  area(s). Indicate the radius covered by both ant
Set out a complete, accurate and ousing the spectrum applied for:  FECHNICAL PORTION  Complete the relevant part(s):  Indicate the transmission medium  Describe the geographic coverage	(s) (e.g. terrestrial, satellite, etc.)  area(s). Indicate the radius covered by both ant

	the make and model of the transmitter. Attach the specifications, including from the equipment and type approval certificates.
Indicate	the modulation scheme.
I. I	de l'acces (l'act)
maicate	the bit rate (bits/s).
Indicate	the transmitter power (dBW/W).
	the antenna make and model. Attach the specifications, including from the equipment and type approval certificates.

Indicate the maximum	antenna gain (dB).		
I., 1'			
Indicate the antenna di	ameter (m).		
Indicate the antenna po	plarization (H/V)		
indicate the antenna po			
Indicate the effective r	adiated power (dBW	V/Watt).	
		· 	
Indicate receiver sensi	tivity threshold (dB1	m).	
<u> </u>			
Indicate fixed loss (db)	: transmit and receive	ve.	

Indicate maximum deviation (kHz).
Indicate the site height above sea level.
Indicate the mast height.
Indicate the antenna height on the mast.
Indicate the antenna direction.
Indicate whether mono/stereo.
For broadcasting licence, indicate vision carrier (MHz), sound carrier (MHz), offset (TV vision) and offset (TV sound).

H.	ANY OTHER INFORMATION Provide any other information you believe might be relevant to the Authority in considering this application.					
PLEAS	SE NOTE:					
•	should accompany this A If an authorized agent of should submit, with the to lodge the application Please provide copies of person. The Authority may reque	Identity documents of the Applicant/li Application Form; completes the Application on behalf of Application Form, a power of attorney, v on behalf of the applicant; f registration documents in the event that est further information or documentation e and the manner set out by the Authority	f the Applicant, such agent which authorizes him or her at the Applicant is a juristic t, which must be provided to			
		at				
warran	ting that the information, 20	, duly authorised and wa provided herein is true and correct, on the	rranting such authority and he day of			
Signatu	ıre					
ACKN	OWLEDGEMENT OF R	ECEIPT BY CRAN				
Name						
Date						
Place						
Signati	ure					

Nationality of Owner

#### **Annexure 4- Form CRAN4**

#### Application Form: Transfer of Licences and Transfer of Control of Licences -**Telecommunications Service Licences**

In terms of Regulation 7 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, a person intending to transfer its licence or transfer control of its licence must submit an application to the Authority on this form.

LICENCE	
Set out details of the licence and attach	a copy of the licence.
Licence Type	
Licence Number	
LICENSEE	
Licensee	
ID or Registration Number of Licensee	
CONTACT PERSON	
Contact Person (full and official names)	
Physical Address	
Postal Address	
Telephone number(s)	
Facsimile number(s)	
Electronic mail address(es)	
TRANSFEREE	
Transferee	
ID or Registration Number of Transferee	
CONTACT PERSON	
Contact Person (full and official names)	
Physical Address	
Postal Address	
Telephone number(s)	
Facsimile number(s)	
	1

Percentage of Ownership

Owner Name

•	FOREIGN OWNERSHIP INTERESTS Provide full details regarding foreign ownership interests in the licensee.
	REASONS FOR THE PROPOSED TRANSFER Set out a complete, accurate and concise statement of the reasons for the proposed transfer or transfer of control.
	ANY OTHER INFORMATION Provide any other information you believe might be relevant to the Authority in considerin this application.
EΑ	SE NOTE:
	The current licence holder should bring this Application. Certified copies of the Identity documents of the Applicant/licensee, contact persons an transferee should accompany this Application Form;
	If an authorized agent completes the Application on behalf of the Applicant, such agent should submit, with the Application Form, a power of attorney, which authorizes him or he to lodge the application on behalf of the applicant;
	Please provide copies of registration documents in the event that the Applicant or the transferee are juristic persons.  The Authority may request further information or documentation, which must be provided to
	the Authority in the time and the manner set out by the Authority.
	Signed by at in his her capacity as, duly authorised and warranting such authority and warranting that the information provided herein is true and correct, on the day of, 20

Signature	
ACKNOWLEDGEMENT OF RECEIPT BY	CRAN
N	
Name	
Date	
Place	
Signature	

#### **Annexure 5- Form CRAN5**

#### Application Form: Transfer of Licences and Transfer of Control of Licences - Broadcasting **Service Licences**

In terms of Regulation 7 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, a person intending to transfer its

LICENSEE		
Licensee		
ID or Registration Number of Licensee		
CONTACT PERSON		
Contact Person (full and official names)		
Physical Address		
Postal Address		
Telephone number(s)		
Facsimile number(s)		
Electronic mail address(es)		
Licence Number:		
Type of Licence:		
(Indicate the category of service(s) license	)	
	)	
(Indicate the category of service(s) license Radio Spectrum Licensed:		
(Indicate the category of service(s) license		
(Indicate the category of service(s) license Radio Spectrum Licensed: PROPOSED TRANSFEREE		
(Indicate the category of service(s) license Radio Spectrum Licensed:  PROPOSED TRANSFEREE  Licensee  ID or Registration Number of Licensee		
(Indicate the category of service(s) license Radio Spectrum Licensed:  PROPOSED TRANSFEREE  Licensee  ID or Registration Number of Licensee		
(Indicate the category of service(s) license Radio Spectrum Licensed:  PROPOSED TRANSFEREE  Licensee ID or Registration Number of Licensee  CONTACT PERSON		
(Indicate the category of service(s) license Radio Spectrum Licensed: PROPOSED TRANSFEREE  Licensee ID or Registration Number of Licensee  CONTACT PERSON  Contact Person (full and official names)		
(Indicate the category of service(s) license Radio Spectrum Licensed: PROPOSED TRANSFEREE  Licensee ID or Registration Number of Licensee  CONTACT PERSON  Contact Person (full and official names) Physical Address		
(Indicate the category of service(s) license Radio Spectrum Licensed: PROPOSED TRANSFEREE  Licensee ID or Registration Number of Licensee  CONTACT PERSON  Contact Person (full and official names) Physical Address Postal Address		

G.

H.

I.

J.

F.	OWNERSHIP INTERESTS IN THE TRANSFEREE

	Owner Name	Percent	age of Ownership		Nationality of Owner
OREIG	N OWNERSHIP IN	ITERESTS			
	ull details regarding		nership interests	in the lic	ensee, if any.
RANSF	EREE BOARD OF	DIRECTOR	RS		
No.	Full Name of Dire	ector	Nationality		Identity Number
TR A NSE	ERFE FINANCIA	I PESOUR	'ES		
	EREE FINANCIA			esources a	available to the trans
nclude a		nts setting ou	t the financial re	esources a	available to the trans
nclude a	statement of accoun	nts setting ou	t the financial re	esources a	available to the trans
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nclude a n relation	statement of accoun	nts setting ou	t the financial re	esources a	available to the trans
nclude a n relation	statement of account to the broadcastin	nts setting ou g service lice	t the financial reence applied for.		available to the trans
nclude a n relation	statement of account to the broadcastin	nts setting ou g service lice	t the financial reence applied for.		available to the trans

3		applications, by the applicant and if the trans wnership interest in the transferee.
Set out	ONS FOR THE PROPOSED TRA a complete, accurate and concis fer of control.	ANSFER e statement of the reasons for the proposed
LICENI	CE AMENDMENT	
Indicate is soug Telecom	ght, the Application Form R mmunications Service Licences, l	equesting an Amendment and Modifica
Indicate is soug Telecom	ght, the Application Form R mmunications Service Licences, l	e amendment is sought. If any licence ame equesting an Amendment and Modifica Broadcasting Service Licences and Use of Setted simultaneously with this application.  NO AMENDMENT SOUGHT
Indicate is soug Telecom Licence  ANY O' A staten	ght, the Application Form Ramunications Service Licences, less must be completed and submit  AMENDMENT SOUGHT  THER INFORMATION	equesting an Amendment and Modifica Broadcasting Service Licences and Use of Stated simultaneously with this application.  NO AMENDMENT SOUGHT  nation the applicant believes might be relevant.
Indicate is soug Telecom Licence  ANY O'A staten	ght, the Application Form Remunications Service Licences, less must be completed and submit  AMENDMENT SOUGHT  THER INFORMATION ment containing any other inform	equesting an Amendment and Modifica Broadcasting Service Licences and Use of Stated simultaneously with this application.  NO AMENDMENT SOUGHT  nation the applicant believes might be relevant.
Indicate is soug Telecom Licence  ANY O'A staten	ght, the Application Form Remunications Service Licences, less must be completed and submit  AMENDMENT SOUGHT  THER INFORMATION ment containing any other inform	equesting an Amendment and Modifica Broadcasting Service Licences and Use of Stated simultaneously with this application.  NO AMENDMENT SOUGHT  nation the applicant believes might be relevant.

#### PLEASE NOTE:

- The current licence holder should bring this Application.
- Certified copies of the Identity documents of the Applicant/licensee, contact persons and transferee should accompany this Application Form;
- If an authorized agent completes the Application on behalf of the Applicant, such agent should submit, with the Application Form, a power of attorney, which authorizes him or her to lodge the application on behalf of the applicant;

Place Signature

•	Please provide cop are juristic persons	•	cuments in the event that the A	pplicant or transferee
•	• •	*	nation or documentation, which set out by the Authority.	h must be provided to
Signed	by		at	in his/her
capacit	ty as		, duly authorised and warrantin	ng such authority and
	ting that the information of the	ation provided herein	is true and correct, on the	day of
Signatı	ure			
ACKN	OWLEDGEMENT	OF RECEIPT BY CF	RAN	
Name				
Date				

#### **Annexure 6 - Form CRAN6**

#### **Application Form: Transfer of Licences and Transfer of Control of Licences** - Spectrum Use Licences

In terms of Regulation 7 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, a person intending to transfer its licence or transfer control of its licence must submit an application to the Authority on this form.

LICENCE	
Set out details of the licence and attach	a copy of the licence.
Licence Type	
Licence Number	
LICENSEE	
Licensee	
ID or Registration Number of Licensee	
CONTACT PERSON	
Contact Person (full and official names)	
Physical Address	
Postal Address	
Telephone number(s)	
Facsimile number(s)	
Electronic mail address(es)	
TRANSFEREE	
Transferee	
ID or Registration Number of Transferee	
CONTACT PERSON	
Contact Person (full and official names)	
Physical Address	
Postal Address	
Telephone number(s)	
Facsimile number(s)	
Electronic mail address(es)	

#### WNEKSHIP INTERESTS

Owner Name	Percentage of Ownership	Nationality of Owner

\_\_\_\_\_, 20\_\_\_.

REASONS FOR THE PROPOSED TRANSFER Set out a complete, accurate and concise statement of the reasons for the por transfer of control.  ANY OTHER INFORMATION Provide any other information you believe might be relevant to the Authorit this application.  The current licence holder should bring this Application. Certified copies of the Identity documents of the Applicant/licensee, cont transferee should accompany this Application Form; If an authorized agent completes the Application on behalf of the Applic should submit, with the Application Form, a power of attorney, which authot to lodge the application on behalf of the applicant; Please provide copies of registration documents in the event that the Applicare juristic persons. The Authority may request further information or documentation, which must the Authority in the time and the manner set out by the Authority.	if any
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ed by at eity as, duly authorised and warranting su	in his

Signature		
ACKNOWLEDGEMENT OF RECEIPT	BY CRAN	
Name		
Date		
Place		
Signature		

#### **Annexure 7 - Form CRAN7**

#### Application Form: Amendment of Telecommunications or Broadcasting Service Licence or Spectrum Use Licence

In terms of Regulation 8(2) of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, a licensee may request the Authority to amend its licence by submitting this application form to the Authority.

After completing the form, sign it and submit it to the Authority as required by Regulation 8, along with the relevant application fee or proof that the application fee has been paid to the Authority.

Licence Type		
Licence Number		
LICENSEE		
Licensee		
ID or Registration Numb	er of Licensee	
CONTACT PERSON		
Contact Person (full and	official names)	
Physical Address		
Postal Address		
Telephone number(s)		
Facsimile number(s)		
Electronic mail address( AMENDMENT	rate and concise statement of the proposed amer	ndment.
Electronic mail address( AMENDMENT		ndment.
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Electronic mail address( AMENDMENT Set out a complete accu	rate and concise statement of the proposed amer	

F.	*	lieve might be relevant to the Authority in considering
	this application.	
PLEAS	SE NOTE:	
•		uments of the Applicant/licensee and contact person
	should accompany this Application For	orm; e Application on behalf of the Applicant, such agent
		Form, a power of attorney, which authorizes him or her
	to lodge the application on behalf of t	
•	The Authority may request further info the Authority in the time and the man	ormation or documentation, which must be provided to
	the Authority in the time and the man	her set out by the Authority.
Signed	by	at in his/her
		, duly authorised and warranting such authority and ein is true and correct, on the day of
	, 20	tall is true and correct, on the day of
	, <u></u> .	
Signatu	nre	
ACKN	OWLEDGEMENT OF RECEIPT BY	CRAN
Name		
Date		
Place		
Signat	ture	

#### **Annexure 8 - Form CRAN8**

### Application Form: Renewal of Telecommunications or Broadcasting Service Licence or Spectrum Use Licence

In terms of Regulation 9 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licence, a licensee may request the Authority to renew its licence by submitting an application to renew the licence on this form.

After completing the form, sign it and submit it to the Authority as required by Regulation 9, along with the relevant application fee or proof that the application fee has been paid to the Authority.

Licence Type			
Licence Number			
LICENSEE			
Licensee	_		
ID or Registration Number	of Licensee		
CONTACT PERSON			
Contact Person (full and off	ficial names)		
Physical Address			
Postal Address			
Telephone number(s)			
Telephone number(s)  Facsimile number(s)			
Facsimile number(s)  Electronic mail address(es)  STATEMENT OF THE Bl Set out a complete and acother entity with compete	ccurate statement dent jurisdiction in rel	tailing any actio ation to any brea	n taken by the Auth ach or alleged breach
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Facsimile number(s)  Electronic mail address(es)  STATEMENT OF THE Bl Set out a complete and acother entity with compete	ccurate statement dent jurisdiction in rel	tailing any actio ation to any brea	n taken by the Auth ach or alleged breach
Facsimile number(s)  Electronic mail address(es)  STATEMENT OF THE Bl Set out a complete and acother entity with compete	ccurate statement dent jurisdiction in rel	tailing any actio ation to any brea	n taken by the Auth ach or alleged breach
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#### PLEASE NOTE:

- Certified copies of the Identity documents of the Applicant/licensee and contact person should accompany this Application Form;
- If an authorized agent completes the Application on behalf of the Applicant, such agent should submit, with the Application Form, a power of attorney, which authorizes him or her to lodge the application on behalf of the applicant;
- The Authority may request further information or documentation, which must be provided to the Authority in the time and the manner set out by the Authority.

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	, duly authorised and warn provided herein is true and correct, on the	
Signature  ACKNOWLEDGEMENT OF	DECEIDT DV CD AN	
ACKNOWLEDGEMENT OF	RECEIPT BY CRAIN	
Name		
Date		
Place		
Signature		

#### **Annexure 9 - Form CRAN9**

#### Application Form: Withdrawal of Telecommunications or Broadcasting Service Licence and Spectrum Use Licence

In terms of Regulation 10 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, a licensee that intends to permanently discontinue providing service in accordance with its licence must request the Authority to withdraw its licence by submitting an application to the withdraw a licence on this form.

After completing the form, sign it and submit it to the Authority as required by Regulation 10.

Licence Type	
Licence Number	
LICENSEE	
Licensee	
ID or Registration Number of Licensee	
CONTACT PERSON	
Contact Person (full and official names)	
Physical Address	
Postal Address	
Telephone number(s)	
Facsimile number(s)	
Electronic mail address(es)	
REASONS FOR PROPOSED WITHE Set out a complete and accurate statem	nent of the reasons for the proposed withdrawa

F.	FEES		
	-	all the fees payable to the Authority in rela	tion to the
	licence.		
G.	ANY OTHER INFORMATION		
	Provide any other information you beli	eve might be relevant to the Authority in co	onsidering
	this application.		
DIEAC	E NOTE.		
PLEAS	E NOTE:		
•	Certified copies of the Identity documents	ments of the Applicant/licensee and conta	act person
	should accompany this Application For	rm;	_
•		Application on behalf of the Applicant, s	
		orm, a power of attorney, which authorizes	him or her
_	to lodge the application on behalf of the	e applicant; rmation or documentation, which must be p	mayidad to
•	the Authority in the time and the mann		rovided to
	the riddiority in the time and the main	or set out by the Humbridge.	
Signed	by		in his/her
capacity	y asi	_, duly authorised and warranting such aut n is true and correct, on the	hority and
	$\frac{1}{2}$ ing that the information provided hereifful $\frac{1}{2}$ .	n is true and correct, on the	day of
	, 20		
Signatu	re		
ACKNO	OWLEDGEMENT OF RECEIPT BY C	CRAN	
7101	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Name			
Date	_		
Place			
Signatu	ıre		

#### **Annexure 10 - Form CRAN10**

#### **Application Form: Spectrum Use Licence for Aeronautical Services**

In terms of Regulation 6 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, any person intending to use spectrum in respect of aeronautical services must submit an application in this form.

After completing the form, sign it and submit it to the Authority as required by Regulation 6. Documents requested must be attached and must be clearly marked.

Licensee			
ID or Registration Number of	Licensee		
CONTACT PERSON			
Contact Person (full and offici	al names)		
Physical Address			
Postal Address			
Telephone number(s)			
Facsimile number(s)			
Electronic mail address(es)			
Owner Name	Perc	entage of Ownership	Nationality of Owner
Owner Name	Perc	entage of Ownership	Nationality of Own
			Nationality of Own
Owner Name  RADIO FREQUENCIES AF List the radio frequencies or downlink or both, as relevan	PPLIED For groups of	OR:	
RADIO FREQUENCIES AF List the radio frequencies or	PPLIED For groups of	OR:	
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RADIO FREQUENCIES AF List the radio frequencies or	PPLIED For groups of	OR:	

TECHNICAL PO	RTION			
Complete the rele				
	Make & Model	Output Power	Class of emission	Frequency Assigned
Transmitters (HF / VHF)				
Emergency Transmitters				
Emergency Transmitters EPIRB Other Equipment				

#### PLEASE NOTE:

- Certified copies of the Identity documents of the Applicant/licensee and contact person should accompany this Application Form;
- If an authorized agent completes the Application on behalf of the Applicant, such agent should submit, with the Application Form, a power of attorney, which authorizes him or her to lodge the application on behalf of the applicant;
- Please provide copies of registration documents in the event that the Applicant is a juristic person.
- The Authority may request further information or documentation, which must be provided to the Authority in the time and the manner set out by the Authority.

Signed by	at at, duly authorised and	
	ovided herein is true and correct, or	
, 20		
Signature		
ACKNOWLEDGEMENT OF REC	CEIPT BY CRAN	
Name		
Date		
Place		
Signature		

#### **Annexure 11 - Form CRAN11**

#### **Application Form: Spectrum Use Licence for Maritime Services**

In terms of Regulation 6 of the Regulations Regarding Licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences, any person intending to use spectrum in respect maritime services must submit an application in this form.

Licensee			
ID or Registration Number of I	Licensee		
CONTACT PERSON			
Contact Person (full and officia	al names)		
Physical Address			
Postal Address			
Telephone number(s)			
Facsimile number(s)			
Electronic mail address(es)			
List the radio frequencies or	groups of		licences applied for, eith
RADIO FREQUENCIES AP List the radio frequencies or downlink or both, as relevant	groups of	radio frequencies	licences applied for, eith
List the radio frequencies or downlink or both, as relevant	groups of	radio frequencies	licences applied for, eith
List the radio frequencies or downlink or both, as relevant	groups of	radio frequencies	licences applied for, eith
SHIP OR MARITIME FIXE	groups of	radio frequencies	licences applied for, eith

TECHNICAL PC Complete the rele				
	Make & Model	Output Power	Class of emission	Frequency F Assigned quencie
Transmitters (SSB / VHF)				
Emergency Transmitters				
EPIRB Other				
Equipment				
ANY OTHER IN Provide any other this application.		elieve might be re	elevant to the Autho	ority in consi
шіз аррисанон.				

#### PLEASE NOTE:

- Certified copies of the Identity documents of the Applicant/licensee and contact person should accompany this Application Form;
- If an authorized agent completes the Application on behalf of the Applicant, such agent should submit, with the Application Form, a power of attorney, which authorizes him or her to lodge the application on behalf of the applicant;
- Please provide copies of registration documents in the event that the Applicant is a juristic person.
- The Authority may request further information or documentation, which must be provided to the Authority in the time and the manner set out by the Authority.

Signed by		
	, duly authorised and war ion provided herein is true and correct, on the	
Signature		
ACKNOWLEDGEMENT O	F RECEIPT BY CRAN	
Name		
Date		
Place		
Signatura		

#### **SCHEDULE 2**

# PURPOSE OF THE PROPOSED AMENDMENT TO REGULATIONS REGARDING LICENCING PROCEDURES FOR TELECOMMUNICATIONS AND BROADCASTING SERVICE LICENCES AND SPECTRUM USE LICENCES COMMUNICATIONS ACT, 2009

- 1. In terms of section 40, 85, and 129 of the Communications Act, 2009 (Act No. 8 of 2009) and the Regulations Regarding Rule-Making Procedures read with the Regulations Regarding licensing Procedures for Telecommunications and Broadcasting Service Licences and Spectrum Use Licences published in General Notice No. 272 of 29 August 2011 and the Regulations Setting Out Broadcasting and Telecommunications Service License Categories published in General Notice No. 124 of 18 May 2011 as amended by Government *Gazette* No. 5148 of 13 March 2013, the Authority intends to repeal the Publication of Forms Regulations published in General Notice No. 131 of 18 May 2011.
- 2. The purpose of the proposed regulations is to regularize the publication of forms for purposes of applications to the Authority and to include two additional broadcasting categories namely "multiplex broadcasting service" and "Class Comprehensive Multiplex and Signal Distribution broadcasting service" as contemplated in the Regulations Setting Out Broadcasting and Telecommunications Service License Categories published in General Notice No. 124 of 18 May 2011 as amended in Government *Gazette* No. 5148 of 13 March 2013. The purpose of the proposed regulations is also to have two separate application forms for spectrum use licences in respect of aeronautical and marime services. This is because the technical information required is different from that of the other spectrum use licenses categories.