

**APPENDIX B**  
**GUIDELINE FOR APPARATUS ASSIGNMENT**  
Sample Amateur Service Application Form



### Suruhanjaya Komunikasi dan Multimedia Malaysia

Malaysian Communications and Multimedia Commission  
Aras 12, Menara Dato' Onn, Putra World Trade Centre, 45 Jalan Tun Ismail 50480 Kuala Lumpur  
Tel : 03-40477000 Fax : 6 03-26940943 http://www.cmc.gov.my

#### APPLICATION FOR APPARATUS ASSIGNMENT (S) (AMATEUR SERVICE)

<input checked="" type="checkbox"/> New apparatus		<input type="checkbox"/> Type of apparatus (Please refer to instructions):				Application Fee <b>RM60</b> per application
<input type="checkbox"/> Existing apparatus	Client ID no.:		Assignment no.(s):	Call sign:	<b>9M2FT</b>	

To be used when applying for all amateur service apparatus assignment(s)

<b>1. CLIENT INFORMATION</b>										
Organization name:		N/A								
Applicant name:		AHMAD BIN ALI								
Business / Residential address:		NO 80, JALAN MAJU JAYA, TAMAN PUTERA								
Town / State:		SUNGAI BESI, KUALA LUMPUR					Postal code:		43000	
Billing address: (if different from above)		SAME AS ABOVE								
E-mail: <b>ahmad@yahoo.com</b>		Telephone: <b>87878787</b>		Fax: <b>87878788</b>		Occupation:		<b>ENGINEER</b>		
Passport / IC No: <b>800420-11-5037</b>		Date of birth: <b>20-04-1980</b>			Place of birth:		<b>KUANTAN</b>			
Citizenship:		<input type="checkbox"/> Malaysian		<input type="checkbox"/> Commonwealth		<input type="checkbox"/> Other, please specify _____				
<b>2. APPLICATION INFORMATION</b>										
Class (A/B)		B								
<b>3. GEOGRAPHIC AREA INFORMATION</b>										
Location name: <i>(If mobile, enter the vehicle registration no.)</i>		WFH 4113 /AS PER ADDRESS								
Site address:		AS ABOVE								
Town / State:1		SUNGAI BESI, KUALA LUMPUR					Postal code:		43000	
Apparatus name:		N/A			Ground elevation: <i>(metres above mean sea level)</i>			N/A		
Number of mobiles / Hand-carried portables:		1			Hand-carried portable (Y/N):			YES		
Geographic area of operations:		N/A			Coverage radius (km):			N/A		
Centre of area of operations Latitude (°N):		__ 3 ° 6 ' 20 "			Longitude (°E):		_1 0_1 ° 30 ' 25 _"			
Structure height (m):		N/A			Building height (m):		N/A			
<b>4. APPARATUS INFORMATION</b>										
Manufacturer / Model / Serial no.:		Power:		Emission:		Frequency Band:		Use (transmitter, receiver etc)		

<b>ICOM 735</b>	<b>10 W</b>	<b>F1A</b>	<b>AMATEUR</b>	<b>TRANSCEIVER</b>

**5. DO YOU HAVE A LICENCE / ASSIGNMENT UNDER THE COMMUNICATIONS AND MULTIMEDIA ACT 1998? IF SO, PLEASE PROVIDE DETAILS OR A COPY OF YOUR LICENCE / ASSIGNMENT.**

NO
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**6. PLEASE STATE THE REQUIRED VALIDITY DATE AND PERIOD.**

Date: <b>15 DEC 2002</b>	Date assignment is issued OR Date required <b>15 FEB 2003</b> (Please state the date)
Period (from 3 months to 5 years):	<b>5 YEARS</b>

**7. I CERTIFY THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE, THE APPARATUS IS TYPE APPROVED FOR USE IN MALAYSIA AND IT WILL BE USED ONLY FOR THE PURPOSES AUTHORIZED BY THE MINISTER OF ENERGY, COMMUNICATIONS AND MULTIMEDIA.**

Signature:	<b>Ahmad Ali</b>	Date:	15 DEC 2002
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**If applicant is under 21 years of age, counter signature of parent or guardian is required.**

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**Note : Please enclosed**

1. A sketch of the aerial(s) to be used.
2. Documentary proof of citizenship.
3. A copy of radio amateur proficiency certificate.
4. Letter of reference from Malaysian Amateur Radio Transmitting Society (MARTS)
5. A declaration of secrecy

FOR CMC USE ONLY

Fee paid:	
Cheque or Bank in slip no.::	
Fee paid:	