

APPLICATION FORM

WIRELESS PUBLIC ADDRESS SYSTEM APPLICATION

Document No:	ComReg 05/17R1
Date:	09/05/17

APPLICATION FOR WPAS SYSTEM

ALL SHADED SECTIONS MUST BE COMPLETED

PART 1

GENERAL INFORMATION

Contact Details

APPLICANT DETAILS

1.	Full Name of the person in whose name the licence is sought	
2.	Address	
3.	Contact name [1]	
4.	Phone No.	
5.	Fax No.	
6.	E-Mail	
7.	Address to which the licence is to be sent, if different from the address given above	
8.	Address to which invoices are to be sent , if different from the address given above	

SUPPLIER DETAILS [2]

1.	Company name	
2.	Contact name [3]	
3.	Address	
4.	Phone No.	
5.	Fax No.	
6.	E-Mail	

 $^{^{[1]}}$ Person in the organisation who is responsible for the radio equipment. $^{[2]}$ Company which is supplying the equipment.

^[3] Supplier contact from whom technical information in relation to radio equipment can be obtained

General Application Details

1.	Type of Application	New A	mendment
2.	Details of existing WPAS licences (if applicable).		
	You may attach a copy of any existing		
	licence/s if you wish		
3.	If an amendment to an existing WPAS		
	licence is requested, please state the		
	details of amendment		
4.	Please indicate the Channel you	1 st preference	
	wish to use	2 nd preference	
		3 rd preference	

_	R WPAS NNELS	UPPER WPAS CHANNELS	
LW01	27.60125		
	27100120	UW01	27.60500
LW02	27.61125		21.00000
21102	27101120	UW02	27.61500
LW03	27.62125	01102	27.01300
LVV03	27.02123	UW03	27.62500
LW04	27.63125	04403	27.02300
LVVU4	27.03123	LIVACOA	27.02500
LWOF	07.04405	UW04	27.63500
LW05	27.64125	LUMOE	07.04500
LWOC	07.05405	UW05	27.64500
LW06	27.65125	UW06	27.65500
1 14/07	07.00405	UVVU6	27.00000
LW07	27.66125		07.00500
		UW07	27.66500
LW08	27.67125		
		UW08	27.67500
LW09	27.68125		
		UW09	27.68500
LW10	27.69125		
		UW10	27.69500
LW11	27.70125		
		UW11	27.70500
LW12	27.71125		
		UW12	27.71500
LW13	27.72125		
		UW13	27.72500
LW14	27.73125		
		UW14	27.73500
LW15	27.74125		
		UW15	27.74500
LW16	27.75125		
		UW16	27.75500
LW17	27.76125		
		UW17	27.76500
LW18	27.77125		
		UW18	27.77500
LW19	27.78125		
		UW19	27.78500
LW20	27.79125		
		UW20	27.79500
LW21	27.80125		
		UW21	27.80500
LW22	27.81125		
		UW22	27.81500
LW23	27.82125		
		UW23	27.82500
LW24	27.83125		
		UW24	27.83500
LW25	27.84125		
		UW25	27.84500
LW26	27.85125		
1.222	07.00	UW26	27.85500
LW27	27.86125	1,000	07.007.00
1 1240.5	OT 07:07	UW27	27.86500
LW28	27.87125		
		UW28	27.87500

ALL SHADED SECTIONS MUST BE COMPLETED

PART 2

TECHNICAL DETAILS

Equipment in the system

BASE STATION Quantity

If more than one Base Station is in operation, this section must be duplicated and completed in respect of each additional station.

1. Transmitter type		
2. Transmitter location		
3. Transmitter Geographical Co-ordinates	Longitude	w
(This refers to the co-ordinates of the	Latitude	N
location where the transmitter is going to be situated.		
	Northing	
An Ordnance Survey Map indicating location may also be provided).	Easting	
	NGR	
	Location	
4. Transmitter Manufacturer		
5. Transmitter Model		
6. Equipment Standard (ETSI etc)		
7. Antenna Manufacturer		
8. Antenna Model 9. Maximum Gain (dBi)		
	Vertical	Horizontal
10. Polarisation of antenna	vertical	Horizontal
11. Antenna height (m)	Above Ground Level	Above Sea Level

FEES

	Quantity	Total
Processing Fee €22	1	€22.00 (Not applicable for amendments)
TOTAL FEE (€)		

METHOD OF PAYMENT

	Cheque	Cheques should be crossed and made payable to The Commission for Communications Regulation		
	Postal Order	Postal Orders should be crossed and made payable to The Commission for Communications Regulation		
	Direct Debit/	For details of these paymen	ts please contact our Accounts Division	on (01) 8049618
Sta	anding Order			
	Bank Transfer	Transfers should be made to: Bank of Ireland, 28 Lower O'Connell Street, Dublin 1. Account Number: 17806887. Sort Code: 90-00-33. Please forward details of date and payment and amount of payment to our Accounts Division.		
	Credit Card	Visa □	Access/ Mastercard \square	Laser \square
Ca	rd No:			
Car	dholder's Name:			
Car				
•	oiry Date: /			
Sign	nature:			

PART 3	
--------	--

DECLARATION BY THE APPLICANT

DECLARATION DI THE ATTLICANI
Application is hereby made on behalf of
In accordance with the Wireless Telegraphy Regulations, 1949 – 1986, I accept responsibility for the installation, maintenance and operation of the system if approved.
I confirm that no change will be made in any of the foregoing without prior approval of The Commission for Communications Regulation.
Signature of applicant:
Name in Block Letters:
Date:

THE APPLICANT/LICENSEE SHOULD BE AWARE THAT HE/SHE IS RESPONSIBLE IN LAW FOR THE RADIO SYSTEM AND ITS OPERATION REGARDLESS OF WHO SUPPLIES THE EQUIPMENT OR WHO OPERATES IT ON HIS/HER BEHALF

The completed Application Form and the appropriate fee should be submitted to: The Commission for Communications Regulation, Licensing Division, 1 Dockland Central, Guild Street, Dublin 1, D01 EX40, Ireland.