



BOTSWANA COMMUNICATIONS REGULATORY AUTHORITY
PLOT 5067, INDEPENDENCE AVENUE | PRIVATE BAG 00495
GABORONE, BOTSWANA
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AMATEUR APPLICATION FORM

1. APPLICANT PARTICULARS	
Client Type	<input type="checkbox"/> Company <input type="checkbox"/> Person <input type="checkbox"/> Gov/Parastatal <input type="checkbox"/> Other _____
Name _____	
VAT Number _____	Nationality _____
Customer No. _____	Company Reg. Number _____
Contact Person _____	

Physical Address

Street _____	Plot No. _____
Ward _____	City _____
Region _____	Tel. No. _____
E-mail Address _____	Mobile No. _____
Fax. No. _____	Nature of Business _____

Postal Address

P.O. Box _____	_____
Private Bag _____	City _____
Ward _____	Tel. No. _____
City _____	Mobile No. _____

2. BASE STATION DETAILS

(You may need to consult your supplier to assist in completing this part of the form)

Type : Fixed/Base <input type="checkbox"/> Mobile <input type="checkbox"/> Portable <input type="checkbox"/>	
Station Name _____	Base Station _____
Street _____	
Ward _____	Site Altitude(m) _____
Area of Operation _____	
City _____	Latitude _____
Region _____	Longitude _____
Country _____	Number of Sites _____
Service Class _____	Station Class _____
Bars. Cert. No. _____	

Equipment

Type : Transceiver <input type="checkbox"/> Transmitter <input type="checkbox"/> Receiver <input type="checkbox"/>	
Callsign _____	
Approval Number _____	Make _____
Model _____	Serial Number _____
Frequency Range _____ / _____	Bandwidth (KHz) _____
Preferred Frequency Band _____	Output Power _____
Total Preset Channels _____	Channel Width (MHz) _____
Emission Class _____	Modulation Type _____
Rx Sensitivity (dBm) _____	Rx Selectivity _____

Antenna

Antenna Type _____	Antenna Gain (dB) _____
Polarization _____	Antenna Height (m) _____
Main Lobe Azimuth (deg) _____	Beam Width (deg) _____
Feed Type _____	Feed Length (m) _____