



BOTSWANA COMMUNICATIONS REGULATORY AUTHORITY
PLOT 5067, INDEPENDENCE AVENUE | PRIVATE BAG 00495
GABORONE, BOTSWANA
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LAND/MOBILE 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. OPERATIONAL SITE 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"/>	
Base Station	
Station Name	Vehicle Registration No. _____
Street	
Ward	Site Altitude(m) _____
City	Latitude _____
Region	Longitude _____
Country	Contact Person at Site _____
Service Class	Station Class _____
Number of Sites	

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) _____