



Telecommunications Authority of Trinidad and Tobago
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 Barataria

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CONCESSION RENEWAL APPLICATION FORM Form C11

A. GENERAL INFORMATION		
Applicant:		
Contact Information		
Name of Individual and Position:		
Mailing Address:		
Telephone:	Fax:	Email:

B. BASIS OF APPLICATION	
B.1 <i>Indicate all applicable public telecommunications networks, public telecommunications services and broadcasting services relevant to this renewal.</i>	
<input type="checkbox"/> Operate a Public Telecommunications Network <ul style="list-style-type: none"> <input type="checkbox"/> Domestic Fixed (Wired) <input type="checkbox"/> Domestic Fixed (Wireless) <input type="checkbox"/> Domestic Mobile <input type="checkbox"/> International Date of grant (dd/mm/yy).....	<input type="checkbox"/> Provide a Public Telecommunications service <ul style="list-style-type: none"> <input type="checkbox"/> Domestic <input type="checkbox"/> International Date of grant (dd/mm/yy).....
<input type="checkbox"/> Provide a Broadcasting Service <ul style="list-style-type: none"> <input type="checkbox"/> Free to Air Radio <input type="checkbox"/> Free to Air Television <input type="checkbox"/> Subscription <input type="checkbox"/> Via a Telecommunications Network (e.g. cable TV operator) Date of grant (dd/mm/yy).....	<input type="checkbox"/> Geographical Area of Coverage <ul style="list-style-type: none"> <input type="checkbox"/> Minor Territorial <input type="checkbox"/> Major Territorial <input type="checkbox"/> National <input type="checkbox"/> Niche Date of grant (dd/mm/yy).....

B.2 Is the applicant the original holder of the Concession?

No

Yes

If no, please indicate the name of the original Concessionaire:

B.3 Does the applicant currently own (in part or otherwise) any telecommunications and/or broadcasting concessions?

No

Yes

If yes, please indicate the Concession type (1 to 5) and date of grant for each one.

(i). Type: Date of Grant (dd/mm/yy):

(ii). Type: Date of Grant (dd/mm/yy):

(iii). Type: Date of Grant (dd/mm/yy):

(iv). Type: Date of Grant (dd/mm/yy):

C. COMPANY INFORMATION

C.1 Directors' Information

Please provide the following information:

- (i) Full names and addresses of all directors, identifying executive and non-executive positions.
- (ii) Valid certificates of good character and full disclosure of any personal bankruptcy for all persons listed in (i) above.
- (iii) Where the director is not a resident of Trinidad and Tobago, a statement identifying any criminal record(s) should be provided for each director, obtained from the law enforcement authorities in the jurisdiction where the person is ordinarily a resident.

C.2 Company Structure/Consortium Information

- (i) Identify all shareholders of the company.
- (ii) Identify all shareholders owning more than 5% of the outstanding allocated and registered shares, including their names, addresses and shareholding (by number and class of shares).
- (iii) Provide a diagram of the ownership and corporate structure of the company, showing any parent, subsidiary or holding companies.

- (i) The role and contribution of each consortium member in terms of resources, experience or expertise.
- (ii) The nature of the relationship between members including a copy of the details of any joint venture agreement, memorandum of understanding or shareholder agreement.
- (iii) Company information in accordance with Part 1 above for each consortium member.
- (iv) A statement advising of any pending litigation and/or arbitration which can potentially affect obligations under the concession
- (v) A statement advising whether or not the applicant and/or any Joint Venture participants or any of their principals, officers, or directors have been involved in any bankruptcy proceeding in the past seven (7) years.

D. BUSINESS PLAN

D.1 Audited Financial Statements

Attach audited financial statements of the company for the past 3 years **if not submitted previously**

Note:

- (i) Micro and small companies may submit financial statements certified by a qualified accountant (as recognized by ICATT) in lieu of audited financial statements.

D.2 Financial Projections and Plans

Please submit the following information:

- (i) Details of plans for the company including new projects and sector development over the period of the new concession.
- (ii) How those plans will be funded? How revenues will be maintained or improved? How will the organisation stay in business? Applicant may submit Investment Plans, Source of Funds and Projected Revenues. Please note under Anti-Money Laundering (AML) and Combatting the Financing of Terrorism (CFT) compliance rules, the Authority may seek other methods of disclosure, as appropriate, and may request further information in this regard.
- (iii) In the event of the reliance of an applicant on a Guarantor, the financial statements of the Guarantor shall also be provided.

D.3 Service and Marketing Plans

(i) Service Descriptions and Plans

The applicant must provide a detailed description (including timeframes) of how it intends to provide new services including services to those areas that are not currently served.

(ii) Customer Charter and Service Standards

The applicant must provide its customer charter and a detailed description of all customer service standards implemented.

(iii) Intellectual Property Rights (IPR)

Where applicable, the applicant must provide proof that they have complied with all IPR requirements.

D.4 Technical Proposal

The applicant must provide detailed information regarding the equipment, systems and/or network facilities relevant to this application, including:

(i) Current Network/Systems Design

- A detailed description and specification of the technology used including current network topology/map, coverage map, network capacity and any points of interconnection.
- Where applicable, completion of the relevant licence application for the licence directly related to the expiring Concession.

(ii) Any New/Proposed Network/Systems Design

- A detailed description and specification of the technology to be used including network topology/map, network capacity and any points of interconnection. The network overview should also indicate any need for additional radio frequency spectrum, if applicable.
- A detailed propagation model/map where applicable; and
- Where necessary, an indication of the intent to co-locate on existing facilities and if the relevant applications for these facilities have been approved.
- The applicant must provide a detailed description of its proposed network rollout plan to cover those areas that are not currently served as well as improvements in quality of service in existing areas. At a minimum this plan must include the populated area and geographic coverage maps and rollout timeframes for the relevant networks and/or services during the rollout period. A rollout coverage map, with timeframes, must also be included in the proposal. The applicant's rollout plan shall also include a roll out schedule to indicate the level(s) of populated area and geographic coverage to be provided both in Trinidad and in Tobago.

E. SUBMISSION CHECKLIST

Please ensure that the relevant documents for the following have been submitted:

ITEM SECTION	DESCRIPTION	CHECK BOX IF SUBMITTED
Form C11	Completed and Signed Concession Application Form	<input type="checkbox"/>
C.1	Directors' Information	<input type="checkbox"/>
C.1	Certificates of good character for all Directors	<input type="checkbox"/>
C.2	Company Structure/Consortium Information	<input type="checkbox"/>
C.1 & C.2	Copy of Litigation/Bankruptcy Statements	<input type="checkbox"/>
D.1 & C.2	Financial Statements for past 3 years	<input type="checkbox"/>
D.2	Source of Funds	<input type="checkbox"/>
D.2	Projected Revenues	<input type="checkbox"/>
D.3	Service Descriptions and Plans	<input type="checkbox"/>
D.3	Customer Charter and Detailed Description of all Customer Service Standards implemented	<input type="checkbox"/>
D.3	Evidence of IPR Compliance	<input type="checkbox"/>
D.4	Current Network/System Design	<input type="checkbox"/>
D.4	Proposed Network/System Design	<input type="checkbox"/>
D.4	Current Network topology/map	<input type="checkbox"/>
D.4	Proposed Network topology/map	<input type="checkbox"/>
D.4	Relevant licence application(s) directly related to this application	<input type="checkbox"/>
D.4	Proposed Propagation Maps/Models	<input type="checkbox"/>
D.4	Proposed Roll-out Plan	<input type="checkbox"/>
D.4	Current Coverage Maps	<input type="checkbox"/>
D.4	Any New/Proposed Coverage Maps	<input type="checkbox"/>
D.4	Proposed Equipment/Technology Technical Specifications	<input type="checkbox"/>

F.	Declaration and Signature	<input type="checkbox"/>	
G.	Concession Application Fee Paid	<input type="checkbox"/>	
H.	Licence Application Fee Paid	<input type="checkbox"/>	

F. DECLARATION AND SIGNATURE

I, the undersigned, do hereby declare on my own behalf and on behalf of the applicant(s) that the information provided in this application is true and correct to the best of my knowledge, information and belief. I acknowledge and agree that submitting an application to the Telecommunications Authority of Trinidad and Tobago does not mean that a concession will be granted, and that consideration of this application is a matter for the exercise of the Authority's discretion acting in accordance with the Telecommunications Act, Chapter 47:31.

If the concession is granted, I am fully aware of all the obligations and conditions associated with the concession. I understand that in processing this application, the Authority may undertake such investigations as it considers appropriate to verify the information submitted and/or to assess the background or suitability of any person involved or to be involved in any permission or authorisation hereby applied for, and I hereby expressly consent for myself and on behalf of the applicant(s) and all such persons, to the carrying out by the Authority of such investigations. I understand that the Authority may require additional information in accordance with the Act and all Regulations made thereunder.

I confirm that I am duly authorised by all the relevant persons to make this declaration.

Applicant:

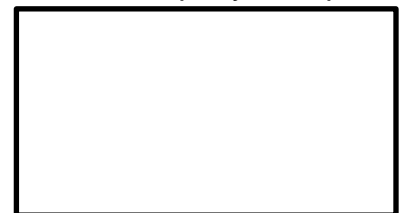
Name of individual authorised to sign on behalf of company (Block Capitals):

Title:

Affix company stamp

Signature:

Date:



For Official Use Only

1. File Number:

2. Type of Application: New Amendment Renewal

3. Application Status: Unsuccessful Successful

4. Reason for Application being unsuccessful:

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5. Name of Evaluation Committee Members:

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6. Signature of Corporate Secretary:

7. Date: