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## REGISTRATION FORM FOR CLASS LICENCE DEVICES

### Form R-CL

**Instructions:**

1. One (1) printed copy of this registration form must be completed and submitted.
2. Please write in BLOCK CAPITAL letters with the use of a pen.
3. Please refer to the Instructions sheet to help you complete this registration form.

<b>A. GENERAL INFORMATION</b>		
Registrant:		
<b>Contact Information</b>		
Name of Individual and Position:		
Mailing Address:		
Telephone:	Fax:	Email:

<b>B. TRANSMITTER CHARACTERISTICS</b>			
	Base Station	Station 1	Station 2
Type of Class Licensed Device			
Manufacturer Make			
Manufacturer Model			
Serial Number <i>(Required for White Space Radiocommunications Devices only)</i>			
Frequency Range of Operation			

	<b>Base Station</b>	<b>Station 1</b>	<b>Station 2</b>
RF Output Power (Watts/dBm)			

**C. ANTENNA CHARACTERISTICS**

	<b>Base Station</b>	<b>Station 1</b>	<b>Station 2</b>
Manufacturer Make			
Manufacturer Model			
Antenna Gain (dB)			
Average Height above ground (m)			
Azimuth (degrees)			
Beam width (degrees)			
Polarization			
Coordinates (degrees, minutes, seconds)			
Physical Address (Location, Street, City/Town)			

**D. DECLARATION AND SIGNATURE**

I, the undersigned, do hereby declare that the information provided in this registration form is correct and accurate to the best of my knowledge.

Registrant: .....

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

.....

Title: .....

Signature: .....

Date: .....