



FAB

Frequency Allocation Board
Headquarters, Plot No. 112, H-10/4, Islamabad
www.fab.gov.pk

**APPLICATION FORM FOR FIXED WIRELESS SERVICES
(Point to Point Microwave Links, VSAT, Telemetry and other Fix Links)**

Automatic generated Reference No. : _____ Date: _____ License No. : _____ Date: _____	For Official Use Only
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1. Name of Applicant Organization: _____
 • Postal Address: _____
 Tel. (with city code): _____ Fax No. _____ Web Site: _____
2. Contact Person: Mr/Ms/Mrs _____
 (First Name) (Last Name)

Designation: _____ Department: _____
 Tel: (with city Code): _____ Mobile No. (if any): _____
 Fax (with city Code): _____ Email: _____

3. **Link Data:**

- a. Nature of Service: Public Government Limited Public Private
- b. Type of Link Bi-directional Unidirectional Spread Spectrum Technology
 Telemetry CMT Microwave Other
- c. Link Capacity _____ Mbps d. Hop Length _____
- e. Working Time: From _____ To _____ f. Type of Transmission Analog/Digital g. Frequency Band _____
- h. Frequency Spot (Requested): Tx _____ Rx. _____ i. Channel Bandwidth: _____
- j. Modulation Type: _____ k. Total No of Sites: _____
- l. Designation of Emission: _____ m. Duration of License: 3 / 5 / 10 / Other Years
- n. Purpose: _____

4. **Site # 1 Data**

- a. AMSL (m) _____ b. Tower Height (m) _____ c. Antenna Height (m) _____
- d. Name of Station _____
- e. Address of Station _____
- f. Coord. Longitude: _____ Degrees: _____ Minutes _____ Seconds _____
 Latitude: _____ Degrees: _____ Minutes: _____ Seconds _____

Note: Provision of Coordinates up to the accuracy of Seconds is mandatory

- g. Height of site above mean sea level (AMSL): _____ Meters
- h. Type of Location: City Hill Rural Within 16 km of Aerodrome
5. **Site # 2 Data:** (separate form for equipment detail to be submitted if different equipment at both site is used)
- a. Name of Station _____

b. Address of Station _____

c. Coord. Longitude: _____ Degrees: _____ Minutes _____ Seconds _____
Latitude: _____ Degrees: _____ Minutes _____ Seconds _____

Note: Provision of Coordinates up to the accuracy of Seconds is mandatory

d. Height of site above mean sea level (AMSL): _____ Meters

e. Type of Location: City Hill Rural Within 16 km of Aerodrome

6. **Equipment Data:**

a. Equipment Name: _____

b. Manufacturer: _____

c. Frequency range of equipment: From _____ To _____

7. **Transmitter:**

a. Transmitter Output Power: Max _____ Working: _____

b. Total Attenuation (dB): _____

c. **Attach Spectrum Chart for Transmitter**

8. **Receiver (for BER 10-6)**

a. C/I at threshold level (dB): _____ b. Receiver threshold level (dB) _____

c. Total Attenuation (dB): _____

Attach Spectrum Chart for Transmitter

9. **Antenna Data**

a. Antenna Name _____ b. Antenna Type _____

c. Manufacturer _____ d. Diameter (m) _____

e. Antenna frequency range from _____ to _____

f. Antenna Gain _____ dBi For Frequency _____

g. Polarization _____

h. Antenna height above ground level. (m). _____

i. Half Power Beam Width: _____ j. Front to Back Ratio (dB) _____

k. Losses (dB): Feeder: _____ Branch _____ Switch _____

Antenna Pattern

PLEASE ATTACH THE AZIMUTH CO-POLARIZATION & CROSS POLARIZATION CHARTS OF THE ANTENNA (ALSO IN TABULAR FORM)

10. Supplementary Information (if any): _____

11. Nature and date of issuance of PTA license awarded to the applicant: _____

DECLARATION

I/We hereby declare that the statement made and particular given in this application form are true and correct to the best of my/our knowledge and belief.

I/We also declare and undertake that all facilities to be acquired by me/us pursuant to this application shall be used by me/us only for the purpose for which it is acquired and that the conditions subject to which the facilities is granted shall be complied with.

Signature: _____

Designation: _____

Name: _____

Place: _____

Date: _____

Office Seal