



**FAB**

**Frequency Allocation Board**

Headquarters, Plot No. 112, H-10/4, Islamabad

[www.fab.gov.pk](http://www.fab.gov.pk)

**APPLICATION FORM FOR LAND MOBILE WIRELESS (PUBLIC) STATION  
(CMT, Radio Trunking, paging, FWA and Other Base Station)**

Automatic generated Reference No. : _____	Date: _____	For Official Use Only
License No. : _____	Date: _____	

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. \_\_\_\_\_  
Fax (with city Code): \_\_\_\_\_ Email: \_\_\_\_\_

3. Purpose: \_\_\_\_\_

4. Duration of License:  3 months  2 years  5 years  Other

5. Nature of Service:  CMT  Radio Trunking  Paging  Other

6. Total No. of Sites: \_\_\_\_\_

7. **Site Data**

a. Name of Station \_\_\_\_\_

b. Address of Station \_\_\_\_\_

c. Radius of Service \_\_\_\_\_

d. Coordinates

Longitude: \_\_\_\_\_ Degrees: \_\_\_\_\_ Minutes \_\_\_\_\_ Seconds \_\_\_\_\_

Latitude: \_\_\_\_\_ Degrees: \_\_\_\_\_ Minutes: \_\_\_\_\_ Seconds \_\_\_\_\_

e. Height of site above mean sea level (meters): \_\_\_\_\_

f. Type of Location:  City  Hill  Other  Within 16 km of aerodrome  Rural

8. **Equipment Data**

a. Equipment Name: \_\_\_\_\_ b. Manufacturer: \_\_\_\_\_ c. Equipment ID: \_\_\_\_\_

d. Type of equipment  Transceiver  Tx Only  Rx Only

e. Designation of Emission: \_\_\_\_\_ f. Channel Bandwidth: \_\_\_\_\_

g. Frequency Range: \_\_\_\_\_

8.1 **Transmitter Data:**

a. Equipment Operating Output: \_\_\_\_\_ (dBm)      b. Modulation: \_\_\_\_\_  
c. Requested Tx Frequencies: \_\_\_\_\_

8.2 **Receiver:**

a. Total Attenuation (dB) : \_\_\_\_\_      b. Receiver Sensitivity (dBm) \_\_\_\_\_  
c. Requested Rx Frequencies: \_\_\_\_\_

8.3 **Antenna Data:**

a. Antenna Name: \_\_\_\_\_      b. Manufacturer: \_\_\_\_\_  
c. Antenna Type: (Monopole/**Dipole**/Loop/Planer/Array/Reflector/Sector/Parabolic): \_\_\_\_\_  
d. Antenna Gain: \_\_\_\_\_ (dBi)      e. Polarization: \_\_\_\_\_  
f. Effective Antenna Height (m) in all Azimuth \_\_\_\_\_  
g. Antenna Height above ground level \_\_\_\_\_  
h. Beam Width (3 dB):      Horizontal \_\_\_\_\_      Vertical \_\_\_\_\_

**NOTE: ATTACH COMPLETE TECHNICAL LITRETURE OF EQUIPMENT (IN ENGLISH LANGUAGE) ALONGWITH AZIMUTH AND ELEVATION PATTERN OF TRANSMITTING ANTENNA OF BASE/REPEATER IN GRAPHICAL AND TABULAR FORM**

9.      Supplementary Information (if any): \_\_\_\_\_  
\_\_\_\_\_

10      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 shall be compiled with.

Signature: \_\_\_\_\_  
Designation: \_\_\_\_\_  
Name: \_\_\_\_\_  
Place \_\_\_\_\_  
Date: \_\_\_\_\_

**Office Seal**