



APPLICATION FORM FOR TYPE APPROVAL

A. APPLICANT PARTICULARS

Applicant Name (representative)/ Company Name: (as written on Importer/Manufacturer License)		Company Importation License No.
Company Address:		License Class
Contact Person: <i>(must be the License Holder or a representative of the License Holder).</i>	Title/Position:	
Tel:	Fax:	E-mail:

B. DETAILS OF RADIO AND TELECOMMUNICATION TERMINAL EQUIPMENT

Equipment Type: -----

Brand Name : ----- Trade Name (If any) : -----

Model No. : ----- Year of Manufacturing : -----

Name of Manufacturer : -----

Address of Manufacturer : -----

The purpose for which Type Approval is being requested

- Equipment to be marketed in Lebanon
- Equipment to be used by Applicant

The purpose(s) for using the equipment:

Please identify all telecom networks to which connection is intended:

C. ADDITIONAL DETAILS FOR RADIO EQUIPMENT

RF Band	Tunning Range *	Channel Bandwidth	Number of Channels	Channel Plan Recommendation	Mode**	If FDD - Channel Spacing	Type and Order of Modulation	RF Output Power	[Software] Version

* For FDD define downlink and uplink ranges in Tunning range field

** Mode: Simplex, Half Duplex / TDD or Full Duplex /FDD

D. RELATED PRODUCTS

If you are applying for type approval of an equipment similar to one for which you already hold a type approval:

Type approval number: -----

Explain the relationship between the equipment above and the existing type approval:

E. TEST REPORTS

Any test report issued: Yes No

If yes:

Test Laboratory: Test report No.:

Date of test:

Test(s) standard (s) applied:

F. DECLARATION

1. I hereby declare that the information and document given in this application form is true and correct.
2. I hereby confirm that the submitted sample is representative of the equipment as stated in this application form.
3. I agree to collect the submitted sample within three months from the date of notification of the evaluation result. If I do not collect the submitted sample within such period of time, I agree that the Telecommunications Regulatory Authority may dispose of the submitted sample in whatever manner it considers appropriate.
4. I agree to comply with any terms, conditions or restrictions which the Telecommunications Regulatory Authority may impose and to be bound by the laws and regulations in force.

Company's Stamp

Applicant's Signature:

Signatory's Name:

Position Held:

Date:

G. FOR INTERNAL USE

Special comments:

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Date approved:

Signature:

For Director of Licensing
(Telecommunication Regulatory Authority)

H. CHECKLIST FOR DOCUMENTATION TO BE PROVIDED WITH THIS APPLICATION:

- Payment of fees or proof that payment has been made (Please note that a separate fee is payable for each separate approval application)
- Declaration of Conformity

TCF comprising (*not required for Class 1 Equipment*)

- Photographs of the external and internal features of the RTTE;
- A description of the intended use of the RTTE;
- A detailed description of the functions and features offered by the RTTE;
- Descriptions and explanations necessary for the understanding of said drawings, schemes and operation of the RTTE;
- A list of the TRA specifications with which the RTTE is designed to comply;
- Test reports from suitably accredited laboratories proving RTTE compliance with these specifications;
- Copy of the RTTE user guide in either the Arabic, French or English language;
- Drawings and schematics showing key components, the wired and/or wireless interfaces of the RTTE;
- Details of antenna for radio equipment.