

Notification of Disposal of Telecommunications Apparatus

This form is to be used in respect of licenced or unlicenced equipment.

1. Notification submitted by, if not licensee, then name of dealer or company:		2. This form is submitted in respect of: <input type="checkbox"/> Disposal of Radio Only <input type="checkbox"/> Cancellation of Licence <input type="checkbox"/> Both	
3. Reason for Cancellation of Radio Below:			
4. Licence Number:	5. Call Sign (if applicable):	Unit Telephone Number (cellular radios):	
7. Status of Licence: <input type="checkbox"/> Valid <input type="checkbox"/> Expired <input type="checkbox"/> Other	8. If "Other" (as noted in item 7), please provide details of licence status:		
9. Name of Licensee:	10. Telephone Number:	11. Fax Number:	
12. Address of Licensee (including postal code):			
LICENCE CLASSIFICATION OF EQUIPMENT INVOLVED IN THIS TRANSACTION			
<input type="checkbox"/> CLASS1 (Broadcasting)		<input type="checkbox"/> CLASS 6 (Aircraft)	
<input type="checkbox"/> CLASS 2 (Experimental)		<input type="checkbox"/> CLASS 7 (Special Services)	
<input type="checkbox"/> CLASS 3 (Amateur)		<input type="checkbox"/> CLASS 8 (Personal Radio)	
<input type="checkbox"/> CLASS 4 (Cellular Radio Only)		<input type="checkbox"/> CLASS 9 (Maritime Mobile)	
<input type="checkbox"/> CLASS 4 (Land Mobile)		<input type="checkbox"/> CLASS 10 (Receiving Systems)	
<input type="checkbox"/> CLASS 5 (Marine Small Craft VHF)		<input type="checkbox"/> CLASS 11 (Aeronautical & Maritime Land Fixed)	
DETAILS OF RADIO EQUIPMENT			
13. Type of Radio: <input type="checkbox"/> BASE ONLY <input type="checkbox"/> BASE & MOBILE <input type="checkbox"/> PORTABLE <input type="checkbox"/> REPEATER			
14. Radio 'ID' Number:	15. Manufacturer:	16. Model:	17. Serial Number:
18. Miscellaneous Information:			
I hereby certify that the information entered above is correct.			
Date:	Print:	SIGNATURE:	

DO NOT WRITE BELOW THIS LINE

LICENCE NUMBER		APPROVED BY	
EXPIRATION DATE		APPROVAL BY	
		ENTERED BY	