

FORM: F



**GENERAL ELECTRONIC COMMUNICATIONS SERVICE PROVIDER
LICENCE APPLICATION FORM**

1. **Application for Service Location** : _____

2. **Name of Applicant** : _____
 - **Trading Name (if applicable)** : _____
 - **Company Registration Number** : _____

3. **Attach Details of all Directors with the following information:**
 - a) Full Names
 - b) ID Number
 - c) Date of Appointment
 - d) Nationality
 - e) Country of residence

4. **Complete postal address:**
 - i) **Corporate Office:**
Address: _____

Tel : _____
Fax : _____
EMAIL: _____

ii) Registered Office:

Address: _____

Tel : _____

FAX: _____

EMAIL: _____

5. Address for Correspondence:

Address: _____

Tel: _____

FAX: _____

EMAIL: _____

6. Name of Authorised Contact Person, his designation and contact details:

Name: _____

Designation: _____

Tel: _____

EMAIL: _____

7. Partners/shareholders in the Company (details of equity holding)

No.	Name of partner/Shareholder	Swazi/Foreign	Equity (%)

8. Enclose the following documents:

- a. Certificate of Registration/ Incorporation (certified copy);
- b. Form J (certified copy);
- c. Form C (certified copy);
- d. First three (3) pages of the Memorandum & Articles of Association;
- e. Resolution of Board of Directors that authorises the company to apply for the GECS-ISP licence and appoints the name of the person authorised to sign the application;
- f. Business Plan;
- g. Technical details of Network/Infrastructure;
- h. Proof of Financial Capacity;
- i. Proof of payment of processing fee;
- j. Existing GEC-ISPs should submit a declaration under oath signed by an authorized company representative stating that the GEC-ISP is an existing GEC-ISP and has been operating as such for a minimum of 12 months.

CERTIFICATES

1. I hereby certify that I have carefully read the guidelines and draft licence on Internet service. I fully comply with the terms and conditions therein.
2. I understand that this application, if found incomplete in any respect and/or if found with conditional compliance or not accompanied with the processing fee, shall be summarily rejected.
3. I understand that the processing fee is non-refundable irrespective of whether or not the licence is granted to me.
4. I understand that all matters relating to the application or licence if granted to me will be subject to jurisdiction of Courts in Eswatini.
5. I understand that if at any time or information furnished for obtaining the licence is found incorrect, my application shall be liable to be rejected and any licence granted on the basis of this application shall be liable to termination.

Date: _____ **Name of authorized signatory:** _____

Place: _____ **Signature of authorised signatory:** _____

FOR OFFICIAL USE ONLY

**GECS-ISP APPLICATION CHECKLIST TO BE COMPLETED BY ESCCOM
TECHNICAL SERVICES DEPARTMENT**

	REQUIREMENTS	CHECKLIST
1.	Fully completed and signed application form	
2.	Business Plan	
3.	Appointed Directors	
4.	details of equity holding (Form C and form J)	
5.	First three (3) pages of the Memorandum & Articles of Association	
6.	Appointed Auditors	
7.	Resolution of Board of Directors	
8.	Certified Copy of certificate of registration	
9.	Technical details of Network/Infrastructure	
10	Proof of Financial Capacity	
11	Evaluating Officers Comments: _____	
12	Recommendation: Approved <input type="checkbox"/> Disapproved <input type="checkbox"/>	
13	Managers Comments: _____	
14	Officers Signature: Managers Signature:	
15	Date:	