



Mbabane Office Park, 4th Floor, North Wing
Mhlambanyatsi Road
P.O. Box 7811, Mbabane, H100
Tel: +268 2406 7000
Email: info@sccom.org.sz
Website: www.sccom.org.sz

APPLICATION FOR RENEWAL OF POINT TO POINT FIXED LINKS LICENCE

1. APPLICANT:

Name: _____

Postal address: _____

Physical address: _____

Tel: _____ Fax: _____

Email address: _____

2. CONTACT PERSON:

Name: _____

Designation: _____

Email address: _____

Tel: _____ Fax: _____

3. GENERAL INSTRUCTIONS

- (a) The renewal of Fixed Service Licence will only be issued to licensees who have complied with all license conditions and have not been found in violation of any legislation that governs Communications.
- (b) The application form must be completed for renewal of Point to point Fixed service license.
- (c) Complete the questions in block letters TYPED, when not applicable, insert N/A. If this form does not cover any detail of your proposed system, please attach a separate letter detailing your requirements.
- (d) The completed application form should be returned with the relevant supporting documentation to the Eswatini Communications Commission.
- (e) A new license may be issued by the Commission subject to payment of an annual license fee prescribed in the schedule of fees found on the ESCCOM website.

4. SERVICE DETAILS

(NB: PLEASE FILL THIS SECTION FOR EACH AND EVERY PROPOSED LINK)

Existing License Number:

Do you wish to make amendments to existing license? **YES** **NO**

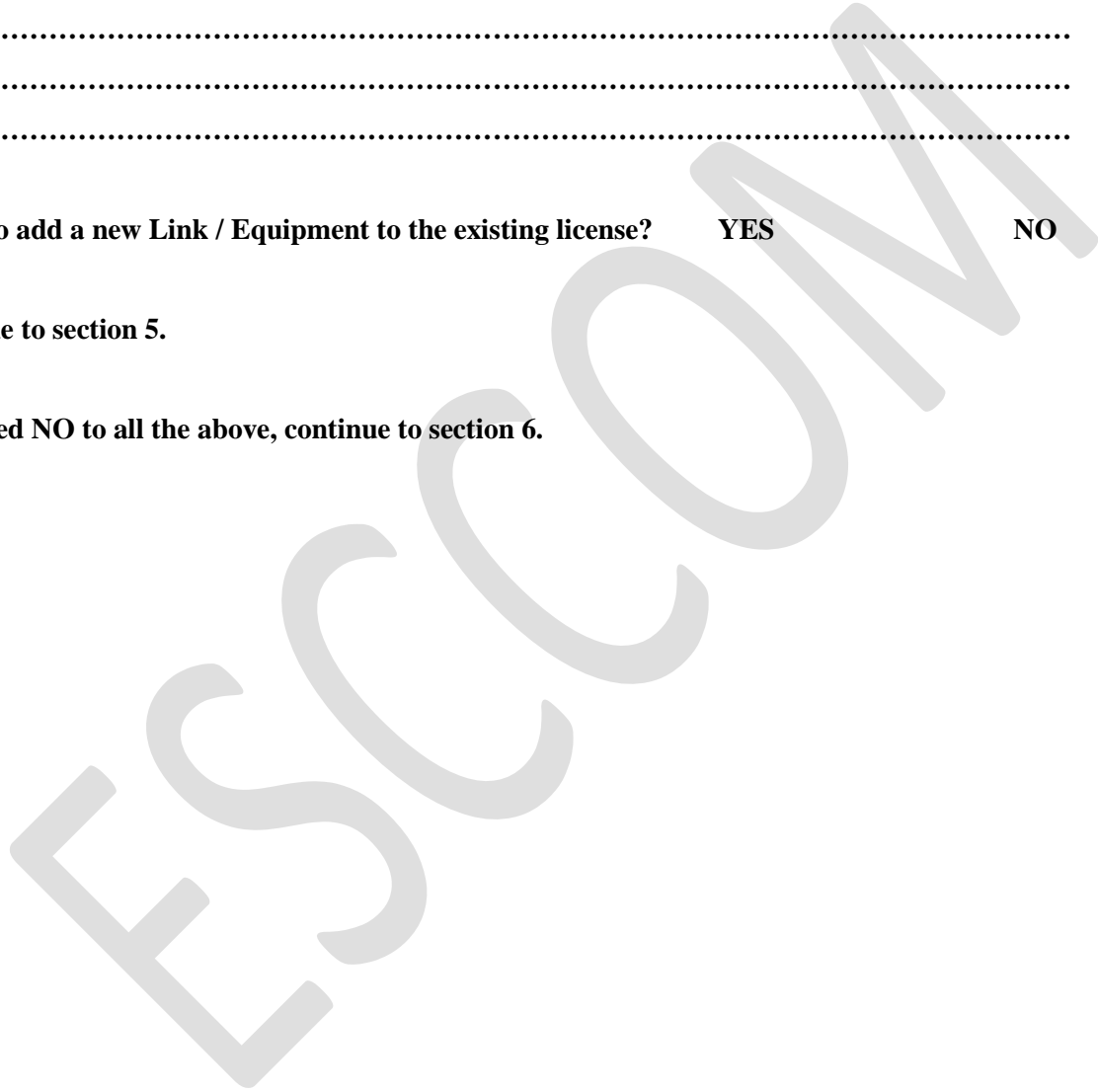
If yes, describe the amendments that you wish to make. (e.g. new frequency, move of station,)

.....
.....
.....

Do you wish to add a new Link / Equipment to the existing license? **YES** **NO**

If yes, continue to section 5.

If you answered NO to all the above, continue to section 6.



5. SYSTEM DETAILS

(NB: PLEASE FILL THIS SECTION FOR EACH AND EVERY PROPOSED LINK)

Please indicate which frequency band you prefer.

1.4 GHz	2GHz	Lower 6GHz	Upper 6GHz		
Lower 7GHz	Upper 7GHz	8GHz	11GHz	13GHz	15 GHz
18GHz	23GHz	26GHz	28GHz	32GHz	38GHz

If appropriate, please specify the tuning range of the equipment.

Lower Frequency: Upper Frequency:

Please (Tick ✓) indicate the preferred polarization:

Vertical Horizontal Co-Channel (dual)

Please state the estimated length of your path:

..... Km

System Details:

Make:

Model:

Equipment Approval Code:

Emission Class:

Output Power:

Bit Rate (e.g. 8Mbps, 155Mbps, ...):

Bandwidth:

Channel Separation:

Receiver Sensitivity (dB):

Modulation Level:

Link Details:

Is this a one-way link? YES NO

SITE A

SITE B

Site Name:

Coordinates: Latitude: Longitude: Latitude: Longitude:

Elevation:

Antenna Height AGL:

Indicate Transmit High or Low:

Antenna Make:

Antenna Model:

Antenna Polarization:

Approval Code:

Directivity:

Beam-width Horizontal (deg.):

Beam-width Vertical (deg.):

Antenna Type:

Antenna Max Gain dB:

Feeder Loss dB:

Any other Loss:

6. DECLARATION: I / We declare that:

1. To the best of my/our knowledge the above-mentioned information given in this application form is true and correct.
2. The Point- to – Point Fixed Link(s) stated in this application form will be used only for the purpose specified in the application.



Applicant/organization/
Agent's Stamp

SIGNATURE OF APPLICANT / AGENT: _____

NAME OF SIGNATORY: _____

DESIGNATION: _____

DATE: _____

ESCCOM