



Republic of Liberia  
Liberia Telecommunications Authority (LTA)  
Cooper Beach Community  
Paynesville City  
West Africa

LTA-SP-105

WRITE OR PRINT CLEARLY

**ENTITY NAME:**

APPLICATION #: \_\_\_\_\_

APPLICATION FEE: **US \$** \_\_\_\_\_

*Every piece of Radiocommunications and Telecommunications Equipment used in the Republic of Liberia must be Type Approved by the Liberia Telecommunications Authority (LTA).*

*LICENSE FORM # LTA1002-A must be completed and submitted with this Form.*

**TYPE OF SERVICE(S) TO BE PROVIDED** (Please Select)

- Voice    Video    Data    Infrastructure    Cable Landing

- Other (Please specify) .....

Name of Chief Executive Officer/General Manager of entity.....

Person in Liberia to be contacted in the absence of Chief Executive Officer/General Manager Name.....

Address.....

Telephone No..... Email .....

**FREQUENCIES REQUESTED AND PROPOSED OPERATIONS**

General description of proposed telecommunications network.....

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**PRECISE FREQUENCIES BEING REQUESTED**

Spectrum Band..... Frequency Assignments.....

Spectrum Band..... Frequency Assignments.....

Spectrum Band..... Frequency Assignments.....

Spectrum Band..... Frequency Assignments.....

Does the applicant, or any affiliate of the applicant, currently has a Spectrum License?

Yes     No

If yes, identify the Licensee and the Date of Issuance:

Licensee.....Date of Issuance.....

**BASIC QUALIFICATIONS INFORMATION**

Does the applicant, or any affiliate of the applicant,

- 1) Has ever applied for a Spectrum License in Liberia?
- 2) Has ever been refused such license or a license renewal?
- 3) Has ever had such license suspended or revoked?

Where the answer to (1), (2) or (3) is “Yes”, please give an explanation below.

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Does the applicant, or any affiliate of the applicant currently hold a Spectrum License in Liberia? If Yes,

- 1) Specify the name of the licensee, the type of license, licensed frequencies and the date issued:

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- 2) Specify the period in which the applicant, or any affiliate of the applicant has been providing telecommunications service or operating the telecommunications network in Liberia.

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Does the applicant, or any affiliate of the applicant currently hold any licenses or authorizations to operate Spectrum in any other countries?

Yes  No

If yes, please name the countries in which the applicant has engaged in operating Spectrum Licenses.

Name of Licensee..... Country.....

Term of Operations.....

Name of Licensee..... Country.....

Term of Operations.....

Name of Licensee..... Country.....

Terms of Operations.....

Name of Licensee..... Country.....

Term of Operations.....

Indicate whether the applicant, or any affiliate of the applicant for a spectrum license or any license or authorization for a telecommunications service or network in any country.

- 1) Has ever been refused such License;
- 2) Has ever had such license suspended or revoked.
- 3) Where the answer to (1) or (2) is "Yes", please provide an explanation below.

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Indicate whether the applicant, or any affiliate of the applicant has ever been convicted of an arrestable offence.

- 1) In any countries?
- 2) If Yes, please provide an explanation below

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Indicate whether any officer or member of the applicant's managerial staff has ever been convicted of an arrestable Offence in any countries.

Yes  No

If Yes, please provide an explanation below

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Indicate whether the applicant or any of the applicant's officers and managerial staff members is currently the subject of a charge or indictment under the laws of any country (excluding non-arrestable offences).

Yes  No

If yes, please identify the name of the Licensee and the License held

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Indicate whether the applicant, or any affiliate of the applicant, have any shareholdings over 5% in any other Licensed Service Provider, Licensed Carrier, or Licensed Spectrum User in Liberia.

Yes  No

If yes, please identify the name of the Licensee and the License held

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Indicate whether the applicant, or any affiliate of the applicant, has any shareholdings over 5% in any licensed telecommunications provider in any West African States.

Yes  No

If yes, please identify the name of the Licensee and the License held

Licensee ..... License.....  
Licensee.....License.....  
Licensee.....License.....  
Licensee.....License.....

Indicate whether the applicant, or any affiliate of the applicant, is engaged in the manufacturing of any telecommunications equipment.

Yes  No

If yes, please provide an explanation below

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Indicate whether the applicant has any business activities outside the telecommunication market.

Yes  No

If yes, please briefly describe the nature of the business activities and where such activity is conducted.

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**CERTIFICATION STATEMENT**

The applicant certifies that all statements made in this application and, attachments, or documents incorporated by reference are true, complete, correct, and made in good faith.

The applicant agrees to comply with the *Telecommunications Act of 2007* and *Telecommunications (Spectrum Management and Licensing) Regulations* with regards to the application procedures and requirements.

If granted a License by the LTA, the applicant agrees to operate the licensed spectrum network in accordance with the *Telecommunications Act, Regulations*, and terms and conditions of the license. Licensee must pay an annual license fee in accordance with the *Telecommunications Act of 2007* and *Regulations*, for License Fees issued by the LTA.

The applicant must obtain any other necessary government approvals required regarding the construction and use of the proposed network facilities.

If granted a license by the LTA, applicant agrees to maintain the capability to shut down operation of any transmitters upon direction of the LTA or in the event of a malfunction.

Typed or printed name of party authorized to sign: .....

Position.....

Signature.....Date.....

**General Filing Instructions:**

1. This document must be signed by a person authorized by the entity. By signing, the applicant certifies that the information submitted is true, complete, correct, and made in good faith.
2. The applicant shall submit five (5) copies of the application, including supporting documentation, and the processing fee, to:  
Liberia Telecommunications Authority (LTA)  
Cooper Beach Community  
Paynesville City  
Republic of Liberia

<b>Official Use Only</b>	
Date Application Received.....	LTA Spectrum Application.....
Permission Granted! <input type="checkbox"/> Yes <input type="checkbox"/> NO, Reason(s) .....	
..... Permission Granted! .....	
Spectrum Issued .....	
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Name of Authorized LTA Personnel .....	Title.....
Signature .....	Date Application Processed.....
License Type.....	
Date Issued.....	Expiration Date.....
Comments: ..... .....	

This completed application form and subsequent payment of applicable fee (s) must be received in our office within 90 calendar days. Failure to provide the required information and payment by \_\_\_\_\_ will result in cancellation of your application.