

## NATIONAL COMMUNICATIONS AUTHORITY (NCA), GHANA

# APPLICATION FOR NUMBERING RESOURCES

## NCA FORM AP18

Payment Receipt No:

(Please attach Receipt)

Date:

(Submission Date)

Application Checklist. Tick (x) in box

- A completed application form
- Cover Letter
- Business Plan
- A Non-Refundable Application Fee
- Company Registration Documents
- Any other Supporting Documents Please list

### **Application for Numbering Resources** (Application to be submitted in triplicates)

Before completing this form, please ensure that you have read and understood the guidelines. Comply with all the requirements listed for the application of this service. A copy of the guidelines may be found on our website: www.nca.org.gh

#### 1. **Corporate Profile**

- Applicant's Name (Registered Business Name): \_ a) Type of Organization b) Government Specify Unit/Agency: Company Physical Address: C) d) Postal Address: Digital Address (GhanaPost GPS): e) Website: f) E-mail: g) Cell Phone: h) Tel: Fax: **Contact Person's Details** First Name: Last Name: a) Identification Document: b)
- Identification Document No: C)
- **Physical Address:** d)
- Post Office Box: e)
- f) E-mail:
- Tel: Cell Phone: g) Fax:

2.

e) Position in Organization:

#### 3. Mobile Numbering Resource Request Details

- a) NETWORK DESTINATION CODE (Check Where Appropriate)
  - a. M2M Numbering Resources
  - b. Regular Mobile Numbering Resources
    - i. Dedicated Network Destination Code
    - ii. Shared Network Destination Code
  - c. Fixed Numbering Resource

#### b) SUBSCRIBER NUMBER

i. Block Size Required

(Request should be in block(s) of Thousand(s) or Million(s)

### 4. Mobile Numbering Resource Utilisation Details

- a) Purpose for Numbering Resource Requirement.
- b) Planned Date of Activation of the applied Numbering Resource.
- c) Number of existing Subscribers and forecast.

#### d) Existing Numbering Utilization

Subscriber Block e.g. 02AXXXXXX -02AYYYYYYYY	Total Active Subscribers	Number of Activation per Month (Please Specify Average figure)		
		Gross Addition	Net Addition	

I hereby certify that the information given above for the application of the National Numbering Resource is true to the best of my knowledge and the resource will be used for the intended purpose indicated above failure by which the allocated numbers would be withdrawn.

Name	
Signature	
Date	

#### SERVICE DEFINITIONS

**Numbering Resources** - these are resources (numbers/codes) issued to Service Providers who have already been Licensed/Authorised by the NCA to facilitate the provisioning of the authorized/licensed services.

