



**NATIONAL COMMUNICATIONS AUTHORITY  
(NCA), GHANA**

**Amateur Radio Operator  
Certificate or Station Licence  
NCA AP14**

Application Fee  
Receipt No:

*(Please attach Receipt)*

Date:

*(Submission Date)*

Application Checklist. Tick (x) in box

- A completed application form
  - Cover Letter
  - Any other Supporting Documents – Please tick
- Please refer to Section 9 for required documents

# Amateur Radio Operator Certificate or Station Licence

## Type Of Application

New	<input type="checkbox"/>	-	In case of <b>New licence application</b> , please fill all sections below except section 8.
Renew	<input type="checkbox"/>	-	In case of <b>Renew</b> please fill sections 1 and 10.
Modify	<input type="checkbox"/>	-	In case of <b>Modifying a licence</b> , please fill the license number and the sections to be modified.
Cancel	<input type="checkbox"/>	-	In case of <b>Cancel</b> please fill sections 1 and 10.

Licence Number: \_\_\_\_\_  
(In case of Modifying a license)

## Type of Licence

Operator                       Station

**Please tick category of licence being sought** If Application is for Operator

Beginner                       Intermediate                       Advanced

- i. **Beginner:** persons who intend to write the Beginner Level Examinations to operate station(s) which have an output power of not more than 100 watts.
- ii. **Intermediate:** persons who intend to write the Intermediate Level Examinations to operate station(s) which have an output power of not more than 250 watts.
- iii. **Advanced:** persons who intend to write the Advanced Level Examinations to operate station(s) which have an output power of not more than 1000 watts.

## 1.0 Administrative Information (to be filled by Applicant)

1.1	Licencee/Applicant Name	
1.2	Customer ID (Fill "Applicant Identification form", in case you are a new applicant or you do not have your User ID) /	
1.3	Authorised Person	
1.4	Technical Contact	

### Remarks:

- In case of more than one equipment, please fill this Section using one sheet for each equipment.
- In case of Type of Equipment = Mobile or handheld, all places in the country are allowed to be visited

## 2.0 Equipment details

2.1	Manufacturer	
2.2	Model	
2.3	Frequency range (MHz)	
2.4	Max. Transmitting Power [dBW]	

2.5	Type of Equipment	Fixed <input type="checkbox"/>	Mobile <input type="checkbox"/>	Handheld <input type="checkbox"/>
2.6	Quantity			
2.7	Serial Number (if available)			

<b>3.0 Geographical information</b> (Compulsory for Amateur Radio Station/Fixed Site)	
3.1	Site name
3.2	Site code
3.3	Station Address
3.4	Longitude*
3.5	Latitude *

<b>4.0 Antenna details</b>				
4.1	Manufacturer *			
4.2	Model *			
4.3	Antenna gain (dBi)			
4.4	Polarisation	<input type="checkbox"/> H - Horizontal	<input type="checkbox"/> M - Mixed	<input type="checkbox"/> V – Vertical
4.5	Directivity	<input type="checkbox"/> Omni	<input type="checkbox"/> Directional	

<b>5.0 Details of Schools/Colleges/Universities Attended with dates:</b>		
INSTITUTION ATTENDED	DATE (month/year)	
	From	To

<b>6.0 Details of present and past employment</b>			
(If self employed), If student, indicate N/A, If school is stated in 5.0 above			
NAME OF EMPLOYER	POSITION HELD	DATES	
		From	To


**7.0 Do you belong to an Amateur Club? YES / NO**

If yes, provide details of Club:

7.1	Name of Club	
7.2	Call Sign of Club Station	
7.3	Location of Club Station	
7.4	Club Contact Person	
7.5	Telephone No:	
7.6	Mobile Phone No:	
7.7	Fax No:	
7.8	E-mail:	

**8.0 Licence(s) List**

(fill only in case of Renew or Cancel)

#	8.1	8.2
	License Number	Date of Expiry
		___/___/___
		___/___/___
		___/___/___
		___/___/___
		___/___/___

**9.0 Attached Documents** (to be attached by Applicant)

Document Name	Check if attached
9.1 Membership certificate from a licenced Radio Amateurs Society or Club	
9.2 Radio Amateur Examination passing certificate	
9.3 Equipment and Antenna Technical Specifications	
9.4 Devices Serial Numbers	

**10.0 Undertaking:**

I/We ..... hereby certify that the information supplied in this application form is true in all respects and I/We hereby give undertaking that upon grant of the Licence/Authorisation, I/We shall abide by the terms and conditions upon which the Licence/Authorisation is granted. I/We accept that my/our Licence/ Authorisation may be revoked and the appropriate penalty/ penalties applied if it is established that I/We have been granted Licence/Authorisation based on incorrect information. I/We further undertake to abide by all existing ITU Regulations and Communications laws of the country as well as other rules, regulations and directives that may be issued.

Date of Submission: \_\_\_/\_\_\_/\_\_\_  
dd / mm / yy

\_\_\_\_\_  
Signature of Authorised Representative/Seal:

**11.0 For Administrative use Only**

12.1	Customer ID	
12.2	Name of Employee who received the application	

Date of Application receipt: \_\_\_/\_\_\_/\_\_\_  
dd / mm / yy

\_\_\_\_\_  
Signature/Seal: