

Republic of the Philippines

NATIONAL TELECOMMUNICATIONS COMMISSION

BIR Road, East Triangle, Diliman, Quezon City

Form No. NTC 1-03
Revision No. 01
Revision Date 03/31/2021

APPLICATION FOR AMATEUR RADIO OPERATOR CERTIFICATE/ AMATEUR RADIO STATION LICENSE

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(2) Attacl	mplish this and the complete refer to the	application form proper lete requirements include the <i>NTC Citizen's Cha</i> copriate box. Indicate	uding su	upporting o	locume I <i>Editio</i>	ents. For the	e List o	of requireme	ents, <u>ntc.gov.p</u>	<u>h</u>			
TYPE OF APPLICATION TYP				PE OF PERMIT/ CLASS OF STATION									
	NEW LICE			ENSE/CERTIFICATE Class A									
	RENEWAL			Amateur Radio Operator Certificate						Class B			
	MODIFICATION due to			Amateur Radio Station License Class C									
				Class D									
				Club Radio Station License									
				Name of Club									
				Assigned F									
		•		Temporary	Permit	for Foreign V	isitor						
NO. OF YEARS 1				Special Pe	rmit for	Vanity/Specia	al Call S	Sign					
				Preferred C	all Sigr	n/s:							
PPLICANT'S D	ETAILS												
ast Name						Date of Birt	th (mm	ı/dd/yy)					
rst Name						Sex		Male			Female	_	
iddle Name						Nationality							
all Sign		ATROC//	ARSL N	0.		•		Validity (mm	n/dd/yy)				
nit/Rm/House/Bldg No.					Stree	Street		1st. Ave. Ext. blk. B6 Mez 1 lapulapu city cebu					
arangay Ibo					City/	City/Municipality							
rovince Cebu					Zip C	Zip Code		5					
ontact Number 09285059927				Email									
XAMINATION [DETAILS												
lace of Exam					Date	(mm/dd/yy)			Rat	ing			
ARTICULARS (OF EQUIPM	MENT (Use separate	sheet/s,	if necessa	iry)								
Make Type/Model				Serial Number					Frequency Range				
enwood TM281A			B7511083					136-17	4 MHz	<u> </u>	_		
FOL ADATION													
ECLARATION	-+ -!! + -	antrias and two and		landou the D		Damel Carla I	-111 1	a balal liabla	f = =	C I . C	-1-1	4/-1	
misrepresentation the permit issue	n(s) made in d/granted. F	ove entries are true and on this application form the further, I am freely giving Privacy Act of 2012.	at may se	erve as a va	lid grou	nd for the der	nial of t	his application	n and/or ca	ncellation	on/revocat ordance v	ion	
							I AN	■ ■ DATE MOUNT: P1,8		, 20_	<u></u>		
Signature over Printed Name of Applicant													
	KICCI F					angela Cantos ecting Officer							
		07/31/2025 Date Accompli	shed										

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED