

Republic of the Philippines

NATIONAL TELECOMMUNICATIONS COMMISSION

BIR Road, East Triangle, Diliman, Quezon City

Form No. <u>NTC 1-02</u> Revision No. <u>01</u> Revision Date <u>03/31/2021</u>

APPLICATION FOR RADIO OPERATOR CERTIFICATE

TYPE OF CERTIFICATE

INSTRUCTIONS:

TYPE OF APPLICATION

- (1) Accomplish this application form properly, in ALL CAPS, handwritten or computer-printed.
- (2) Attach the complete requirements including supporting documents. For the List of requirements, please refer to the **NTC Citizen's Charter 2021 Second Edition** at NTC website: www.ntc.gov.ph
- (3) Check (✔) appropriate box. Indicate "N/A" for items not applicable.

| NEW | | | | | | | 1RTG | | | SROP | | | | |
|---|---------------------------------|--------------|-----------------|---------------|----------------|---------------------|-------------------|------------------|---------|--|---------|---------------------------|---------------|--|
| | RENEWAL | | | | | | 2RTG | | | RROC-Land Mobile (RLM) | | | | |
| | MODIFICATION due to | | | | | | 3RTG | | | RROC-Aircraft | | | | |
| | | | | | | | 1PHN | | | GROC (Government) | | | | |
| | | | | | | | 2PHN | | | TP RROC-Aircraft (Foreign Pilot) | | | | |
| NO. OF YEARS 3 | | | | | | | 3PHN | | | OTHERS, specify | | | | |
| | | | ı | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| APPLICAN | T'S DETAIL | LS | | | | | | | | | | | | |
| Last Name | lame Del Mar | | | | | | Date of Birth (mn | | | n/dd/yy) | | 07/10/1975 | | |
| First Name | Ch | ristoph | ier | | | | Weight (kg) | | | 54 | Heigh | nt (cm) | 175 | |
| Middle Nam | ne Ma | Maturan | | | | Status | | | | Employed | | ✓ Uner | mployed | |
| Sex | | ✓ | ✓ Male Female | | | | Employment | | J | Local | | | | |
| Nationality FILIPINC | | |) | | | 1 | | | Foreign | | | | | |
| Unit/Rm/House/Bldg No. | | | | | | | Street Ma | | Matu | tumbo | | | | |
| Barangay | | | Pusok | | | | City/Municipality | | | | | | | |
| Province | | | Cebu | | | | Zip Code | | 6015 | | | | | |
| Contact Number | | | 09391472092 | | | | Email Address | | | | | | | |
| EXAM/SEM | IINAR DET | AILS | | | | | | | | | | | | |
| Place of Exam/Seminar | | | Cebu city | | | Date (mm/dd/yy) 200 | | 2001 | 1-08-18 | | Rating | 79 | | |
| DECLARATION | | | | | | | | | | | | | | |
| misrepresent | tation(s) mad ed. Further, I | le in this a | application for | m that may se | rve as a valid | l grouna | for the | e denial of this | applic | held liable fo ation and/or ca in accordance | ancella | tion/revocatio | n of the perm | |
| | | | | | | | | | | OR NO.: DATE MOUNT: <u>P39</u> (| : 07/2 | 34782 24 , 20 <u>2</u> | 5 | |
| Signature over Printed Name of Applicant O7/24/2025 Ricci Angela Cantos Collecting Officer | | | | | | | | | | | | | ! | |
| | | | | CCOMPlished | | SALE AN | ND CAN | N BE REPROI | DUCED |) | | | | |
| | | | | | | | | | | | | | | |