



Application Form for Class License

(If space is insufficient please attach information as Appendices)

Tick (✓) whichever is applicable

- 1. Application for:
 - A. Terminal Equipment Providers License
 - B. VSAT Services Providers License
 - C. DotSO domain Registrar

2. Name of Applicant:

3. Registration Number and type of legal entity registered with Ministry of Commerce and Industries:

4. Address:
PO Box No: _____

Building: _____

Street: _____

State: _____

5. General description of facilities/service/activity to be owned or provided or operated by the applicant:

6. Contact particulars of two persons namely a Managing Director and of the company who may be contacted for further information:

Name	Position	Telephone No.	Address

7. Company's Applicant website address, if any:

8. Additional information in support of application, if any:

9. Declaration:

I am the fully authorized representative of _____
and I hereby confirm that all the information submitted in this and all related
documents for the purpose of this application for a class license under the National
Communications Laws by Article No (41) of 2017 are correct and true.

Signature: _____

Name: _____

Designation: _____

Date: _____

Stamp:

For NCA Use