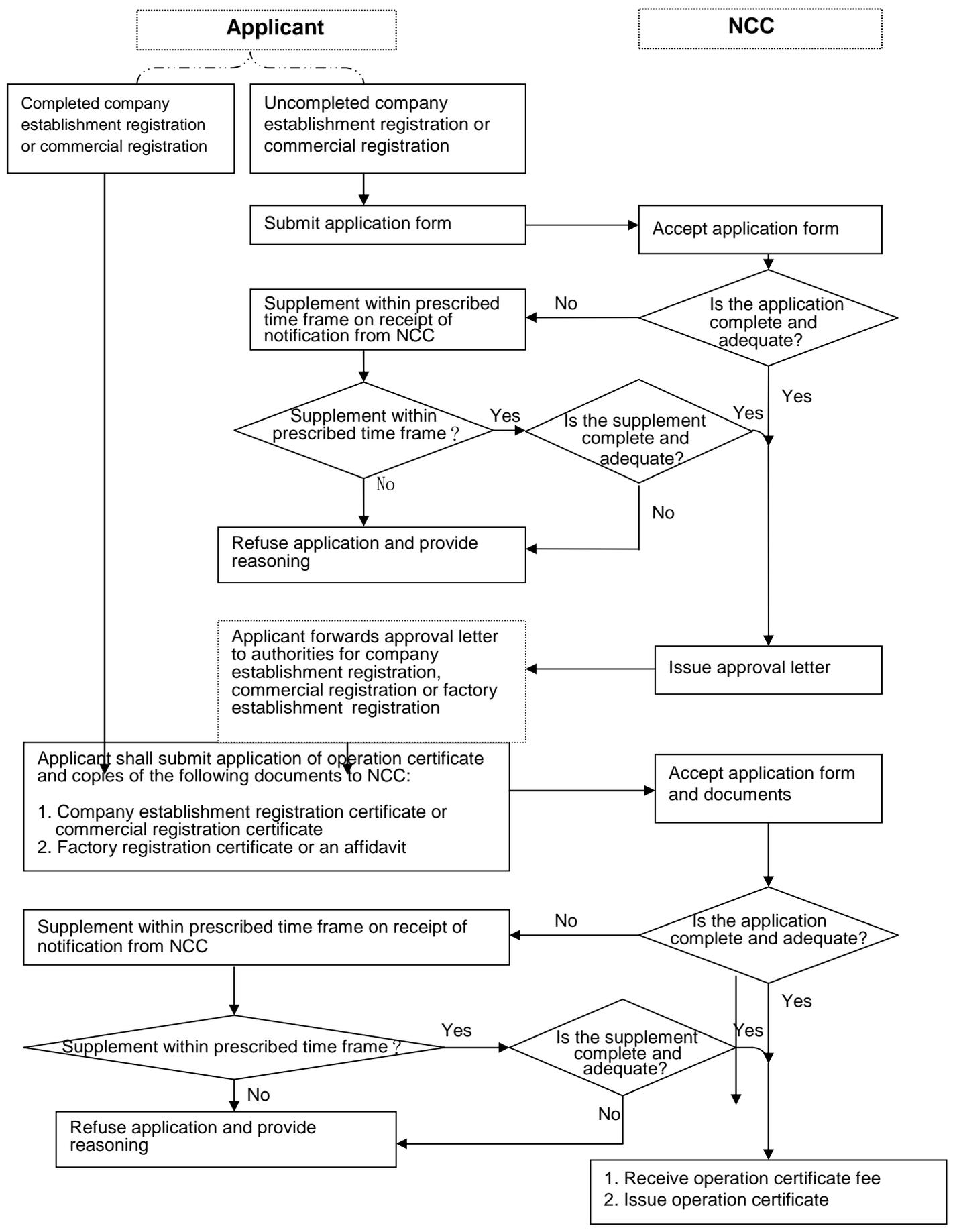
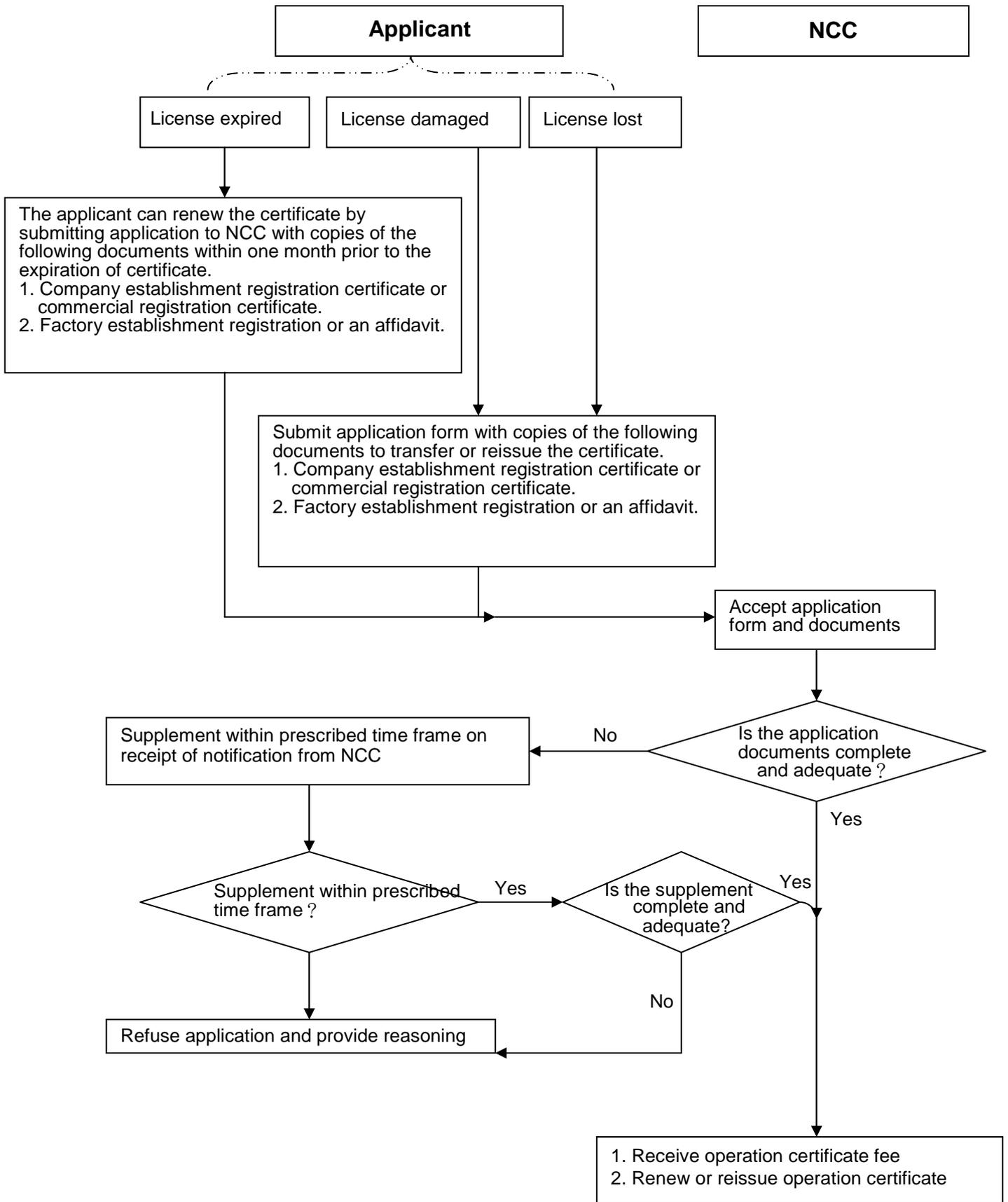


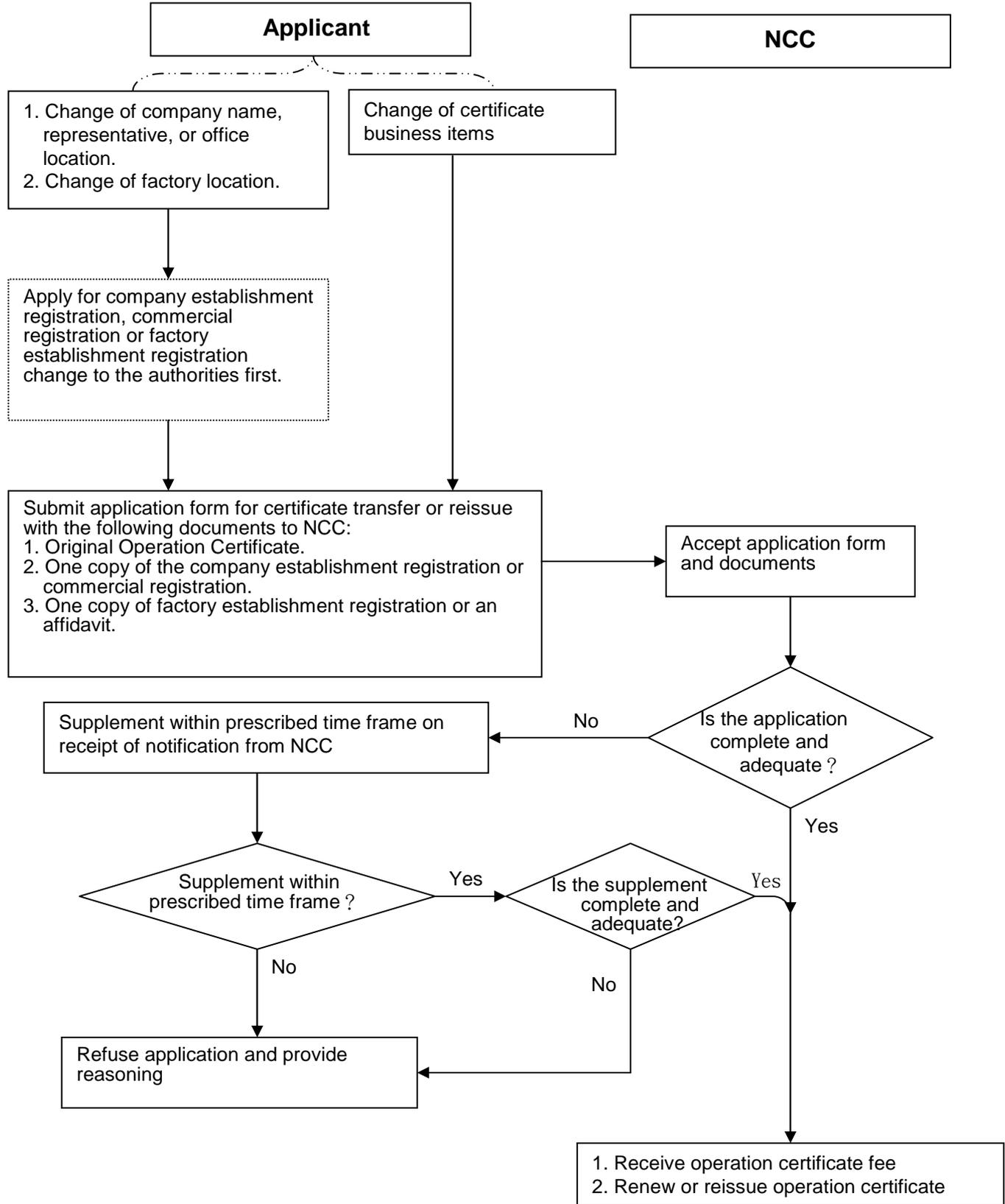
# Application for CTRFD operation certificate flowchart



# Application for CTRFD reissue operation certificate flowchart

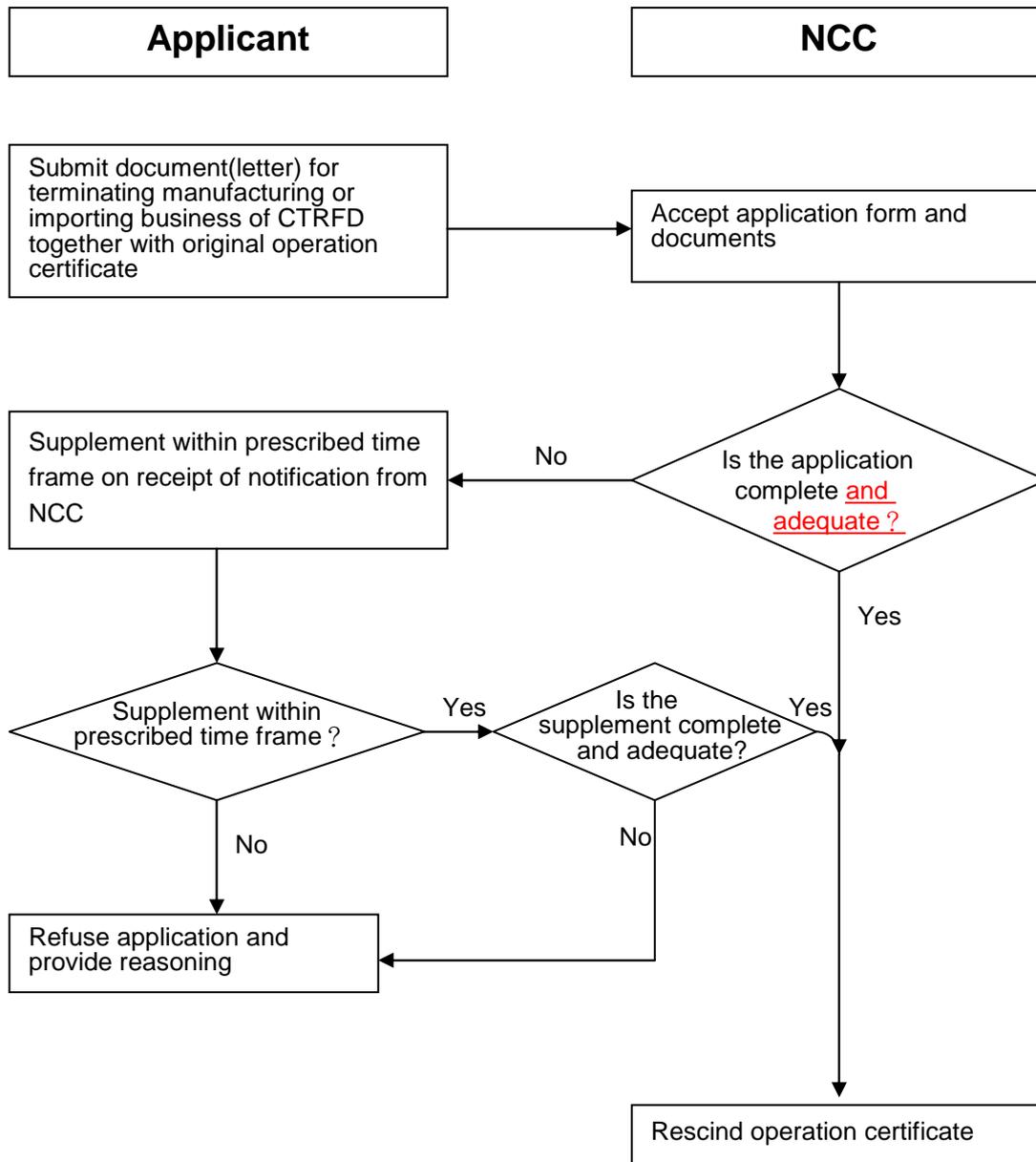


**Application for reissue or transfer of CTRFD operation certificate flowchart**

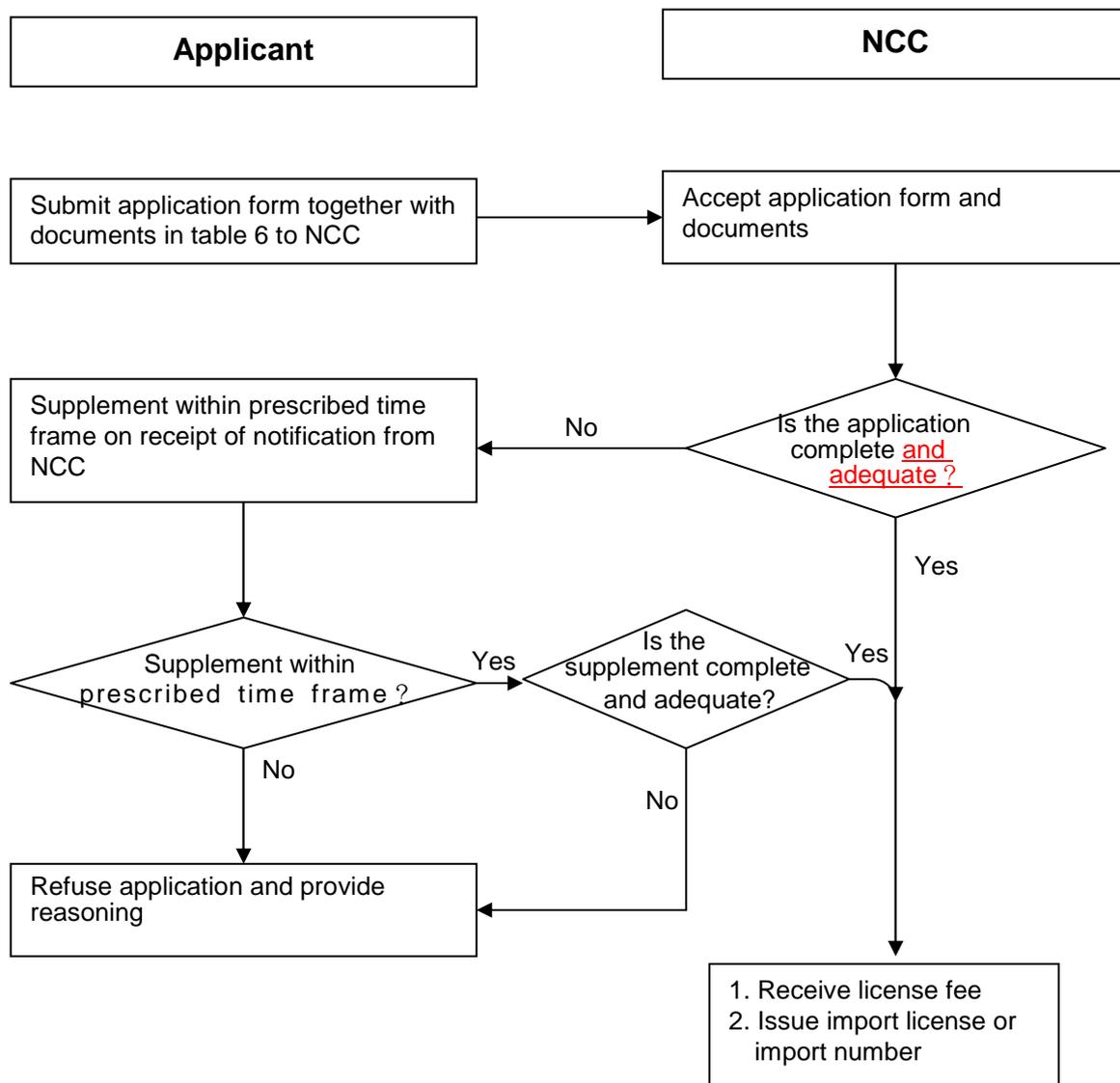


# Attachment 4

## Application flowchart for terminating manufacturing or importing business of CTRFD



### Application for CTRFD import permit flowchart



**Table 1****Application form: CTRFD operation permit**

Application date:      /day      /month      /year

<b>Applicant</b>	Company name				(Company stamp)	
	Company address					
	<b>Representative</b>	Name				
		Identification number				
		Domicile address				
	Contact person			Email		
Telephone No.			Fax			
<b>Deputy of Applicant</b>	Company name				(Company stamp)	
	Business account number					
	Company address					
	<b>Representative</b>	Name				
		Identification number				
		Domicile address				
Contact person			Email			
Telephone No.			Fax			
<b>Certificate of Business items</b>	<input type="checkbox"/> Manufacture items	<input type="checkbox"/> Radio transmitter <input type="checkbox"/> ISM equipment	<input type="checkbox"/> Radio transceiver <input type="checkbox"/> Other radio wave radiated equipment	<input type="checkbox"/> Radio receiver		
	<input type="checkbox"/> Import items	<input type="checkbox"/> Radio transmitter <input type="checkbox"/> ISM equipment	<input type="checkbox"/> Radio transceiver <input type="checkbox"/> Other radio wave radiated equipment	<input type="checkbox"/> Radio receiver		
<b>For official use only</b>	Result :					
	<input type="checkbox"/> Issue operation certificate.					
	<input type="checkbox"/> Reason for refusal:					
	Department officer	Direct officer	Reviewer	Director		

**Table 2**

**Application form: CTRFD operation certificate**

Application date :        /day        /month        /year

Applicant	Company name				(Company stamp)	
	Business account number					
	Company address					
	Representative	Name				
		Identification number				
		Domicile address				
	Contact person			Email		
Telephone No.			Fax			
Deputy of Applicant	Company name				(Company stamp)	
	Business account number					
	Company address					
	Representative	Name				
		Identification number				
		Domicile address				
	Contact person			Email		
Telephone No.			Fax			
Certificate of Business items	<input type="checkbox"/> Manufacture items	<input type="checkbox"/> Radio transmitter	<input type="checkbox"/> Radio transceiver	<input type="checkbox"/> Radio receiver		
		<input type="checkbox"/> ISM equipment	<input type="checkbox"/> Other radio wave radiated equipment			
Attached document	<input type="checkbox"/> One copy of company establishment registration or commercial registration					
	<input type="checkbox"/> One copy of factory establishment registration or an affidavit					
For official use	Result:					
	<input type="checkbox"/> Approve and issue the operation license. Fee: TWD_____for license. License No: _					
	Valid Date:    /day    /month    /year					
	<input type="checkbox"/> Reason for refusal:					
	Department officer	Direct officer	Reviewer	Director		





**Table 5**

**Application form: CTRFD import permit**

Application date :        /day        /month        /year

Applicant	Company name								
	Business account number								
	Company address								
	Representative	Name							
		Identification number							
		Domicile address							
	Contact person			Email					
	Telephone No.			Fax					
Deputy of Applicant	Company name							(Company stamp)	
	Business account number								
	Company address								
	Representative	Name							
		Identification number							
		Domicile address							
	Contact person			Email					
	Telephone No.			Fax					
Import items of Controlled RF devices	Origin of the devices : From _____ to _____								
	Item No.	Device Name	Brand	Model	Operation frequency	Transmit power	Quantity		
	1								
	2								
	3								
Attached document	<input type="checkbox"/> Original bill of lading <input type="checkbox"/> Catalog or specification data <input type="checkbox"/> Power of attorney <input type="checkbox"/> Affidavit <input type="checkbox"/> Others <input type="checkbox"/> Original export list certificate and certificate No: _____. <input type="checkbox"/> Operation license and license No: _____. <input type="checkbox"/> Radio station establishment permit document and document No. _____. <input type="checkbox"/> Project approval document and document No: _____. <input type="checkbox"/> Type certification documents and document No: _____								
	For official use only	Result : <input type="checkbox"/> Issue the import certificate No. Fee TWD: _____ for certificate. Certificate No. : _____							
Department officer		Direct officer		Reviewer		Director			

**Table 6****List of Required documents to apply for CTRFD import permit**

Item	Device category	Required document	Note
1	Mobile satellite earth station or small satellite earth station, amateur wireless devices, or ISM equipment ( regulation 17.3-17.4 )	1. Import permit application form. 2. Operation certificate. 3. The product manual or specification or related documents. 4. Type approval certificate, Doc certificate or Special approved document.	1,2
2	Controlled telecommunications radio-frequency devices for ships flying a foreign flag or exporting ( regulation 17.5 )	1. Import permit application form. 2. Operation certificate. 3. The product manual or specification or related documents. 4. Foreign flag flying certificate(yacht excluded) and purchase contract or special program authorization document.	1,2
3	Ship back after export of foreign manufactured controlled telecommunications radio-frequency devices. ( regulation 19.1 )	1. Import permit application form. 2. Operation certificate. 3. The product manual or specification or related documents. 4. Original export list certificate.	1,2,4
4	1.Provided for compliance approval, exhibition, research, testing, which is not required for radio station license. 2.Export purpose only, temporarily imported for reproduce, maintenance or assembly. ( regulation 19.2-19.4 )	1. Import permit application form. 2. Operation certificate. 3. The product manual or specification or related documents. 4. Affidavit.	1,2
5	Imported wireless TTE, LP devices (max. ten sets); except small satellite earth station, mobile earth station. ( regulation 19.5 )	1. Import permit application form. 2. Original bill of lading. 3. The product manual or specification or related documents. 4. Individual identified document, legal or non- legal entity's establishment registration.	1,3,5
6	Imported amateur mobile radio station (max. two sets). ( regulation 19.6 )	1. Import permit application form. 2. Original bill of lading. 3. The product manual or specification or related documents. 4. Amateur operator licenses. 5. Affidavit.	1-3
7	Other controlled radio-frequency devices.(not included in items 1-6)	1. Import permit application form. 2. Original bill of lading. 3. The product manual or specification or related documents. 4.System setup permit, network construction permit, radio setup permit or special approved document.	1,2,6

**Notes:**

1. All copies must include stamp of company, government organization, or an individual seal.
2. The applicant may download the specifications and technical data of the device (including operation frequency, transmit power) from the manufacturer's website as a substitute for the product manual or specification or related documents.
3. The product manual or specification or related documents is not required if CTRFD imported for self-use and has obtained NCC or recognized certification body by NCC for compliance approval certificate or DoC certificate.
4. When the documentation is incomplete or the application differs from the original exporter, the applicant shall apply for CTRFD import according to item 7.
5. Individual, government organization, company, firm, group or school imported CTRFD for self-use are exempt from obtaining an operation permit.
6. Imported CTRFDs for special approved document are exempt from submitting an affidavit.

**Table 7****Affidavit**

Purpose: Application for CTRFD operation permit		<b>Import certificate NO:</b>	
Company name			
Business account number			
Company address			
Factory address			
Representative	Name		
	Identification number		
	Domicile address		
Contact person		Email	
Telephone No.		Fax	
<p>Declaration :</p> <p>I/We hereby apply for the import of CTRFD according to the Article 19 of "Administrative Regulations on the Controlled Telecommunications Radio-Frequency Devices.</p> <p>Device Name : _____ Brand : _____ ,</p> <p>Model : _____ Operation frequency : _____ ,</p> <p>Transmit power : _____ Quantity : _____ ,</p> <p>Purpose : <input type="checkbox"/> Compliance approval. <input type="checkbox"/> Research, test, or exhibition.</p> <p><input type="checkbox"/> Export after reproduce, maintenance, assembly.</p> <p><b>In addition, I/We will export the imported device by _____ (/Day/ Month/Year) or notify NCC for surveillance of its destruction according to the Article 19 of "Administrative Regulations on the Controlled Telecommunications Radio-Frequency Devices".</b></p> <p>Purpose : <input type="checkbox"/> Imported amateur mobile radio station</p> <p><b>In addition, the applicant should apply for type approval and obtain an "amateur mobile radio station license" within three months since the next day of NCC issued import license. If unqualified, the device shall be exported within three months or report to NCC for surveillance of its destruction. If necessary, the owner can extend the period once only within 14 days before the due date by written request. I/We hereby declare that the above declaration to the best of my/our knowledge is true and correct.</b></p> <p>Signature/seal : (stamped by company and Representative person or sealed by government organization.)</p> <p style="text-align: center;">/Day                      /Month                      /Year</p>			

**Table 8****Appointment Letter**

I/We appointed ( appointee name ) hereby apply for an ( import permit / operation certificate/... ) ,and shall undertake the responsibility of all conduct.

TO: ( Northern, Central, Southern ) Regional Regulatory Department of NCC

Appointer : (stamped by company and representative person or sealed by government organization)

Representative:(Signature/seal)

Company address:

Contact person:

appointee ( individual Name or Company name ) : stamped by company and representative person or sealed by government organization.

Domicile address ( or Company address ) :

Telephone No:

/Day

/Month

/Year

