

## Table 1 Application form of CTRFD manufacturing

**Date of Application:**

<b>Applicant</b>	Name of company				<b>Applicant's company seal and representative seal</b>	
	VAT number					
	Office address					
	<b>Representative</b>	Name				
		ID No.				
		Home address				
	Contact			Fax		
	Contact phone(local call)					
	Contact phone(mobile)					
E-mail						
<b>Proxy Applicant</b>	Name of company				<b>Applicant's company seal and representative seal or proxy applicant seal</b>	
	VAT number					
	Office address					
	<b>Representative</b>	Name				
		ID No.				
		Home address				
	Contact			E-mail		
	Contact phone			Fax		
<b>Item applied</b>	<input type="checkbox"/> Newly issued		Item changed	Content changed		
	<input type="checkbox"/> Change of company or factory profile		<input type="checkbox"/> Name of company <input type="checkbox"/> Representative <input type="checkbox"/> Office address <input type="checkbox"/> Factory address			
<b>Attached documents</b>	<input type="checkbox"/> Photocopy of company or business registration certificate. <input type="checkbox"/> Factory registration certificate or exemption certificate of factory registration issued by the municipality or county (city). <input type="checkbox"/> A photocopy of the approval certificate for telecommunications control radio frequency equipment. (for change of item)					

**Table 1-1 Proxy**

<b>Proxy</b>	
Here I appoint ( name of Trustee or name of unit ) to act as an agent to handle the affairs of and the trust or shall be responsible for all actions.	
To NCC	
Trustor ( name of Trustee or name of unit ) :	
Representative :	Signature/stamp
( If it is judicial person, company seal and representative's chop and official seal of institution or applicant must be stamped, )	
VAT No. (ID No. or Passport No.):	
Office address (or household registration address):	
Contact phone:	
Trustee ( name of Trustee or name of unit ) :	
Signature/stamp	
( If it is judicial person, company seal and representative's chop and official seal of institution or applicant must be stamped, )	
VAT No.(ID No. or Passport No.:	
Office address (or household registration address):	
Contact phone:	
Date:	