

Table 1 Application form of CTRFD manufacturing

Date of Application:

Applicant	Name of company				Applicant's company seal and representative seal	
	VAT number					
	Office address					
	Representative	Name				
		ID No.				
		Home address				
	Contact			Fax		
	Contact phone(local call)					
Contact phone(mobile)						
E-mail						
Proxy Applicant	Name of company				Applicant's company seal and representative seal or proxy applicant seal	
	VAT number					
	Office address					
	Representative	Name				
		ID No.				
		Home address				
	Contact			E-mail		
Contact phone			Fax			
Item applied	<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			
Attached documents	<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

Proxy

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: