

Table 2 Application form of Class 1 CTRFD Import Approval Certificate

 New

 Reissue

 Renew

Application date:

| | | | | | | | |
|--|--|--------------------------------|-------|------|-----------------------|--------------|----------|
| Applicant | <input type="checkbox"/> Natural person | Name | | | | | |
| | | ID No. or Passport No. | | | | | |
| | | Household registration address | | | | | |
| | <input type="checkbox"/> Judicial person | Name | | | | | |
| | | VAT No. | | | | | |
| | | Office address | | | | | |
| Name of representative | | | | | | | |
| ID No. or Passport No. of representative | | | | | | | |
| Agent | <input type="checkbox"/> Natural person | Name | | | | | |
| | | ID No. or Passport No. | | | | | |
| | | Household registration address | | | | | |
| | <input type="checkbox"/> Judicial person | Name | | | | | |
| | | VAT No. | | | | | |
| | | Office address | | | | | |
| Name of representative | | | | | | | |
| ID No. or Passport No. of representative | | | | | | | |
| Agent info | Name of contact | | | | Fax | | |
| | Contact phone (local call) | | | | Contact phone(mobile) | | |
| | E-mail | | | | Address | | |
| Usage of import | <input type="checkbox"/> Public telecommunication network settings, dedicated telecommunication network settings or amateur radio settings | | | | | | |
| | <input type="checkbox"/> Foreign ships or ships for export | | | | | | |
| | <input type="checkbox"/> R&D, testing or exhibition | | | | | | |
| | <input type="checkbox"/> Not manufactured domestically and re-exported (return) after import | | | | | | |
| | <input type="checkbox"/> Verification (type ratification, simple compliance declaration) | | | | | | |
| | <input type="checkbox"/> Processing, repair or exclusive for export after assembly | | | | | | |
| | <input type="checkbox"/> Mobile amateur radio stations for personal use | | | | | | |
| <input type="checkbox"/> Device specified in the project approval document | | | | | | | |
| Items of imported CTRFD | No. | Device name | Brand | Type | working frequency | Output power | Quantity |
| | 1 | | | | | | |
| | 2 | | | | | | |
| | 3 | | | | | | |
| Notes: The power and frequency of CTRFD imported for inspection, processing, repair or assembly for output purpose may not comply with relevant technical specifications. | | | | | | | |

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|--------------------|--|
| Attached documents | <input type="checkbox"/> Identification documents of natural persons, documents of establishment of judicial persons or unincorporated groups |
| | <input type="checkbox"/> Catalogue, specification data or related certification documents |
| | <input type="checkbox"/> The official letter number of the approval document of the network establishment plan, the approval document of the radio station setting or the approval document of the radio station installation permit, Tong-chuan _____ Zi No. _____. |
| | <input type="checkbox"/> Type certification certificate, conformity declaration certificate or simple conformity declaration certificate, verification number: |
| | <input type="checkbox"/> Foreign ship registration certificate or sales contract |
| | <input type="checkbox"/> Project approval document, the official letter number of the project approval document, Tong-chuan _____ Zi No. _____. |
| | <input type="checkbox"/> The original export declaration form with official seal of custom and the original export declaration number |
| | <input type="checkbox"/> Amateur radio personnel license <input type="checkbox"/> Affidavit |
| | <input type="checkbox"/> Self-use affidavit <input type="checkbox"/> Proxy <input type="checkbox"/> Other |

I declare that to the best of my knowledge the items listed are correct. If any errors or false statements are given, we are willing to bear all legal responsibilities without objection.

Applicant's signature/ stamp

Representative's signature/ stamp

Signature/ stamp of applicant's agent:

Signature/ stamp of agent's representative:

If it is judicial person, company seal (or official seal of institution) and representative's chop shall be stamped.

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| | | | |
|---|--------|-------------------|-----------------|
| Review result (Filled by the accepting unit) | | | |
| <input type="checkbox"/> Accept. Issue the approval certificate or certificate number for the import of CTRFD. License fee receivable: _____NT; certificate number: : ° | | | |
| <input type="checkbox"/> Deny, reason for return: | | | |
| Undertaker | Review | Direct supervisor | Unit supervisor |
| | | | |