NTC Form No.: APPL-09
Reference No: _____

Republic of the Philippines
NATIONAL TELECOMMUNICATIONS COMMISSION
BIR Road, East-Triangle, Diliman, Quezon City

APPLICATION FOR PERMIT TO :

☐ **SELL** ☐ **TRANSMITTER (s)**
☐ **TRANSFER** ☐ **TRANSCEIVER (s)**

INSTRUCTIONS: *All blanks must be filled up properly. Indicate "**N/A**" for items not applicable. Duly accomplished form must be submitted with required/supporting documents. Print all entries in block or CAPITAL LETTERS*

☐ Fixed and Land Mobile ☐ Amateur ☐ Maritime ☐ Special
☐ Aeronautical ☐ Broadcast ☐ Satellite ☐ Others: _____

Number of unit(s): _____

_____ Repeater _____ Base _____ Portable _____ Others

1 **APPLICANT** : _____
2 **BUSINESS ADDRESS** : _____
3 **CONTACT NO(s)** : _____ **EMAIL ADD.:** _____
4 **APPLICANTS' PERMIT TO PURCHASE/POSSESS/RSL NO.:** _____
5 **BUYER'S NAME** : _____
6 **BUSINESS ADDRESS** : _____
7 **BUYER'S PERMIT TO PURCHASE NUMBER** : _____

8 **PARTICULARS OF EQUIPMENT(s): (Use separate sheets if necessary)**

	1st Unit	2nd Unit	3rd Unit	4th Unit
Make				
Type/Model				
Serial Number				
BW & Emission				
Frequency Range				
Power Output				

9 **CERTIFICATION**

I HEREBY CERTIFY that the above entries are true and correct, that the radio station(s) shall be installed / constructed in accordance with the prescribed standards and in conformity with the existing Radio Laws and Regulations and that I shall be liable for any willful false statements made in this application under the Revised Penal Code of the Philippines.

_____ _____
Signature over Printed Name of Applicant / or Authorized Representative — Date

OR **NO:** _____
DATE: _____ ,20___
AMOUNT: _____

_____
CASHIER

PLEASE SEE BACK HEREOF FOR THE REQUIREMENTS TO BE SUBMITTED

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED

Revision No.:
Revision Date:

DOCUMENTARY REQUIREMENTS FOR SUBMISSION :

1 Copy of Seller's Permit to Purchase/ Possess/ Radio Station License
2 Buyer's Permit to Purchase

NTC REGIONAL OFFICE NO.: _____
Office Address: _____
Contact No.: _____
Fax No.: _____
E-mail Address: _____