

Application for Area Spectrum Licences

Fixed Wireless Access

(Allocation Round 2)



Office Use Only

_____ File number

Statutory Declaration

_____ Applicant ID number

Certificate of Deposit

_____ Date received

_____ Acknowledgement sent

Directions

Complete this application

If space on this document is insufficient, please staple additional information to the relevant page.

Who may sign

The licence applicant, or a person authorised to sign on behalf of the applicant (eg, a Company Secretary).

Agency Authority

The applicant may nominate any qualified person to act as a technical adviser (Agent) in respect of this application (Panel F). The Agent may not be delegated authority by the applicant to make any licence application on behalf of any person or agency. Applicants should have regard to the rules of association in the Allocation Rules when considering the appointment of an Agent.

Certificate of deposit

A certificate of deposit attesting that an amount sufficient to cover the reserve prices of all of the lots nominated in Panel E of this document is lodged in a trust account that is not under the authority of the applicant, and signed by a bank officer, solicitor or chartered accountant, must accompany this application. **DO NOT SEND MONEY TO THE MINISTRY OF ECONOMIC DEVELOPMENT AT THIS STAGE OF THE APPLICATION.**

Incomplete application

Any incomplete or questionable application may be returned or delayed. If the issues concerned are not resolved by the closing date for applications, the application may be rejected.

Enquiries

Any questions about the application should be referred to the Ministry's contact centre at 0508 776 4636 or emailed to radiospectrum@med.govt.nz with '3.5 GHz allocation' in the Subject line.

Notes

Any licence granted will be in the name of the person or organisation named as the applicant on this application. Annual fees in accordance with Schedule 6 of the Radiocommunications Regulations 2001 will be payable upon transfer of the licence to the applicant. Full details, including the name and address of the licensee, will be held in the Register of Radio Frequencies and will be available for public inspection. Natural persons have the right to request the Registrar of Radio Frequencies (P O Box 2847, Wellington) that their *residential* address be withheld.

All reasonable care will be taken when making radio frequency assignments, but the nature of such assignments is that no guarantee can be given that implementation and use will be trouble free. Accordingly, the Crown

Directions

accepts no liability under any circumstances for any loss or damage of any kind, and any costs incurred in correcting problems, including a frequency change, will be the responsibility of the licensee.

The licensing of a frequency or channel does not imply a reservation in perpetuity.

Ministry contact details

All correspondence in respect of this application should be addressed to: 3.5 GHz Allocation, Radio Spectrum Policy and Planning, Ministry of Economic Development, P O Box 1473, Wellington. PDF documents will be accepted and may be emailed to radiospectrum@med.govt.nz with '3.5 GHz allocation' in the Subject line.

Requests for information printed in **Bold** and *Italics* must be completed

Licence Applicant details

Licence category (*tick one*)

- | | |
|--|--|
| <input type="checkbox"/> Natural person (<i>go to panel A</i>) | <input type="checkbox"/> Charitable Trust (<i>go to panel B</i>) |
| <input type="checkbox"/> Incorporated Society (<i>go to panel B</i>) | <input type="checkbox"/> Industrial or Provident Society (<i>go to panel B</i>) |
| <input type="checkbox"/> Government agency (<i>go to panel B or C</i>) | <input type="checkbox"/> Co-operative Company (<i>go to panel C</i>) |
| <input type="checkbox"/> Limited Liability Company (<i>go to panel C</i>) | |

Panel A: Natural persons

1 **Name of applicant** _____
First name *Family name/surname*

2 **Title** **Mr** **Mrs** **Ms** **Other** _____

3 **Contact details**

Contact person _____

P O Box or Pr. Bag _____

Number and street _____

Suburb _____

Town/City _____ *Post code* _____

Contact telephone number *Area code* __ *Number* _____ *Mobile* _____

Email address _____

- 4 **I hold no radio or spectrum licences under this name**
- I hold _____ radio or spectrum licences under this name**

Panel B: Not-for-profit organisations

1 Name of organisation _____

2 Names of all Board (or other governing body) members

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

3 Contact details

Contact person _____

P O Box or Pr. Bag _____

Number and street _____

Suburb _____

Town/City _____ Post code _____

Contact telephone number Area code ___ Number _____ Mobile _____

Email address _____

4 No radio or spectrum licences are held under the name of this organisations, or of any member of its governing body

_____ radio or spectrum licences are held under the name of this organisations, and/or by members of its governing body

Panel C: Commercial entities

1 Name of company _____

2 Names of principle Directors and Shareholders, as recorded in the Companies Register

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

3 Contact details

Contact person _____

P O Box or Pr. Bag _____

Panel C: Commercial entities

Number and street _____

Suburb _____

Town/City _____ Post code _____

Contact telephone number Area code __ Number _____ Mobile _____

Email address _____

- 4 No radio or spectrum licences are held under the name of this organisations, or of any member of its governing body
- _____ radio or spectrum licences are held under the name of this organisations, and/or by members of its governing body

Panel D: Service and location details

1 **Licence type** Spectrum licence – Other services (fixed point to multi-point, bi-directional link)

2 **Purpose of service** _____

3 **Proposed power** _____ dBW (eirp)

4 **Proposed specification**

Technical standard (eg, Wi-Fi, WiMAX) _____

Equipment type _____

Number of (a) base stations _____ (b) CEPs _____

Other relevant information _____

Panel E: Location (please tick [✓] the lots for which you will be applying)

Whangarei D C	<input type="checkbox"/> 503-WHG-1	\$10,900		
Kaipara D C	<input type="checkbox"/> 503-KPR-1	\$2,800		
Franklin D C	<input type="checkbox"/> 503-FRA-2	\$8,300		
Thames-Coro'l D C	<input type="checkbox"/> 503-THA-1	\$4,000	<input type="checkbox"/> 503-THA-2	\$4,000
Hauraki D C	<input type="checkbox"/> 503-HAU-1	\$2,700	<input type="checkbox"/> 503-HAU-2	\$2,700
Waikato D C	<input type="checkbox"/> 503-WKT-1	\$6,400	<input type="checkbox"/> 503-WKT-2	\$6,400
Matamata-Piako D C	<input type="checkbox"/> 503-MAT-1	\$4,700		
Otorohonga D C	<input type="checkbox"/> 503-OTO-1	\$1,500	<input type="checkbox"/> 503-OTO-2	\$1,500
South Waikato D C	<input type="checkbox"/> 503-SWK-2	\$3,800		
Waitomo D C	<input type="checkbox"/> 503-WTO-1	\$1,500	<input type="checkbox"/> 503-WTO-2	\$1,500
Rotorua D C	<input type="checkbox"/> 503-ROT-1	\$10,400	<input type="checkbox"/> 503-ROT-2	\$10,400
Whakatane D C	<input type="checkbox"/> 503-WHK-1	\$5,300	<input type="checkbox"/> 503-WHK-2	\$5,300
Kawerau D C	<input type="checkbox"/> 503-KAW-1	\$1,100	<input type="checkbox"/> 503-KAW-2	\$1,100
Opotiki D C	<input type="checkbox"/> 503-OPO-1	\$1,500	<input type="checkbox"/> 503-OPO-2	\$1,500
Gisborne D C	<input type="checkbox"/> 503-GIS-1	\$7,100	<input type="checkbox"/> 503-GIS-2	\$7,100
Wairoa D C	<input type="checkbox"/> 503-WRO-1	\$1,400	<input type="checkbox"/> 503-WRO-2	\$1,400
Napier CC	<input type="checkbox"/> 503-NAP-1	\$8,600	<input type="checkbox"/> 503-NAP-2	\$8,600
Hastings D C	<input type="checkbox"/> 503-HAS-1	\$10,800		
New Plymouth D C	<input type="checkbox"/> 503-NPL-1	\$10,600	<input type="checkbox"/> 503-NPL-2	\$10,600
Stratford D C	<input type="checkbox"/> 503-STR-1	\$1,400	<input type="checkbox"/> 503-STR-2	\$1,400
Sth Taranaki D C	<input type="checkbox"/> 503-STD-1	\$4,400	<input type="checkbox"/> 503-STD-2	\$4,400
Ruapehu D C	<input type="checkbox"/> 503-RUA-1	\$2,300	<input type="checkbox"/> 503-RUA-2	\$2,300
Wanganui D C	<input type="checkbox"/> 503-WNG-1	\$6,900	<input type="checkbox"/> 503-WNG-2	\$6,900
Rangitikei D C	<input type="checkbox"/> 503-RAN-1	\$2,400		
Manawatu D C	<input type="checkbox"/> 503-MAN-1	\$4,400		

Palmerston Nth D C	<input type="checkbox"/> 503-PNC-1	\$11,700		
Horowhenua D C	<input type="checkbox"/> 503-HOR-1	\$4,800		
Kapiti Coast D C	<input type="checkbox"/> 503-KCD-1	\$6,800		
Masterton D C	<input type="checkbox"/> 503-MAS-1	\$3,600		
Carterton D C	<input type="checkbox"/> 503-CAR-1	\$1,100		
S Wairarapa D C	<input type="checkbox"/> 503-SWD-1	\$1,400		
Grey D C	<input type="checkbox"/> 503-GRY-1	\$2,100	<input type="checkbox"/> 503-GRY-2	\$2,100
Westland D C	<input type="checkbox"/> 503-WST-1	\$1,200	<input type="checkbox"/> 503-WST-2	\$1,200
Hurunui D C	<input type="checkbox"/> 503-HUR-2	\$1,600		
Waimakariri D C	<input type="checkbox"/> 503-WMK-2	\$5,900		
Christchurch C C	<input type="checkbox"/> 503-CCC-2	\$50,800		
Banks Pen D C	<input type="checkbox"/> 503-BPD-1	\$1,200	<input type="checkbox"/> 503-BPD-2	\$1,200
Selwyn D C	<input type="checkbox"/> 503-SEL-2	\$4,400		
Ashburton D C	<input type="checkbox"/> 503-ASH-2	\$4,000		
Timaru D C	<input type="checkbox"/> 503-TIM-2	\$6,700		
Mackenzie D C	<input type="checkbox"/> 503-MAC-1	\$1,000	<input type="checkbox"/> 503-MAC-2	\$1,000
Waimate D C	<input type="checkbox"/> 503-WMT-1	\$1,100	<input type="checkbox"/> 503-WMT-2	\$1,100
Chatham Is Council	<input type="checkbox"/> 503-CHA-1	\$1,000	<input type="checkbox"/> 503-CHA-2	\$1,000
Waitaki D C	<input type="checkbox"/> 503-WTK-2	\$3,200		
Central Otago D C	<input type="checkbox"/> 503-COT-2	\$2,300		
Dunedin C C	<input type="checkbox"/> 503-DUN-2	\$18,500		
Clutha D C	<input type="checkbox"/> 503-CLU-1	\$2,700	<input type="checkbox"/> 503-CLU-2	\$2,700
Southland D C	<input type="checkbox"/> 503-STH-1	\$4,600	<input type="checkbox"/> 503-STH-2	\$4,600
Gore D C	<input type="checkbox"/> 503-GOR-1	\$2,000	<input type="checkbox"/> 503-GOR-2	\$2,000
Invercargill C C	<input type="checkbox"/> 503-INV-1	\$7,900	<input type="checkbox"/> 503-INV-2	\$7,900

Panel F: Agency Authority and Declaration

Agency Authority

I _____ being the licence applicant, authorise
_____ of
(contact address) _____
_____ (contact phone) _____

to act as Technical Adviser on my behalf in the execution of this application.

Signature of applicant _____ **Date** _____

Declaration

In accordance with the regulations made pursuant to Part VI of the Radiocommunications Act 1989, I hereby apply for the grant of a licence for the installation, operation or use of the radio apparatus described in Panel D of this document. By submitting this application I agree to the terms and conditions of the Allocation Rules under which this application is being made.

I CERTIFY THAT ALL OF THE INFORMATION GIVEN IN THIS DOCUMENT IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT.

Signature of applicant _____ **Date** _____