FORM 4

COMMUNICATION REGULATORY AUTHORITY OF NAMIBIA APPLICATION IN RESPECT OF TELECOMMUNICATIONS EQUIPMENT PREVIOUSLY TYPE APPROVED Regulation 13(2)(a)

In terms of Regulation 13(2) of the Regulations in respect of Telecommunications Equipment Requiring Type Approval, subsequent users of equipment that appears on the Authority's type approval register may apply for a certificate to use, connect, sell or offer to sell equipment already type approved in accordance with the simplified certification process.

After completing the form, sign it and submit it to the Authority as required by Regulation 13, along with the relevant application fee or proof that the application fee has been paid into the bank account of Authority, with the following particulars:

Account name: Communications Regulatory Authority of Namibia

Account Number: 8002848071 **Account type:** Cheque Account

Branch: Capricorn
Branch code: 486 372
Swift code: BWLINANX

Reference: Applicant name / Customer number / Invoice number

1. APPLICANT

Name of Applicant	
Postal Address:	
Physical Address:	
Contact Person:	
Email Address:	
Telephone No:	
Website:	

2. EQUIPMENT DETAILS

Please indicate the appropriate equipment category –

Category	Tick Here	Example of Equipment (Non Exhaustive)
Call Monitoring Equipment		Call Metering Unit
		Call Monitoring Unit
		Call Barring Unit
		Call Recording Unit
		Subscriber Private Meter
Data Equipment		Modem
		Packet Assembler/Disassembler (PAD)
		Multiplexer (MUX)
Access Transmission and Network Equipment		All type of operator telecommunication and radio communications equipment (Switching Equipment's, Base Station Controller, Base Stations, Microwave Transmitter, Base Station Transmitter, WiMAX terminal Cell Extender, Cellular Repeater Operating in IMT bands etc.)
IoT Network Equipment		Sigfox Lora, Zigbee, Radar, Wireless Smart Utility Network (Wi-SUN) Equipment, IoT Gateways and Base Stations
Wireless Access Equipment		Point to Point / Point to Multipoint Access Devices Wireless Routers
Remotely Piloted Aircraft (RPA)		Drone Remote Controller
Aeronautical Equipment		Aeronautical Base Station Equipment, Aeronautical transceiver installed on board aircrafts
Maritime Equipment		Maritime Base Station equipment Maritime transceiver installed on ships.
Radio Communications		High Frequency (HF)
Equipment		Very High Frequency (VHF)
		Ultra-High Frequency (UHF)
		Radio Alarm Transmitter
		Ultra-Wideband (UWB) sensors and radars (such as ground probing radar)
		Automatic Identification System (AIS)
		Search and Rescue Transponder (SART)
		Emergency Position Indicating Radio Beacon (EPIRB)
		Citizen Band Radio
		Amateur Radio
Satellite Equipment		Satellite Phone
		Earth Station Terminal
		Very Small Aperture Terminal (VSAT),

Short Range Devices/	Closed circuit television (CCTV)	
Low Power terminals	Industrial control devices	
	Road Transport telematics	
	Telemetry	
Telephone Terminal Equipment	Global System for Mobile (GSM) phone	
	Cordless phones	
IMT Terminal (other than mobile phones)	Dongles/trackers/Tablets/POS and routers with GSM/LTE/NR	
VOIP network equipment	El interface card	
	Voice Over Internet protocol (VOIP) gateway	
	IP terminal	
Broadcasting equipment	DTT Set – Top Box Receiver	
Type Approval Certificate		
Type Approval Certificate		
Number		
Number Date of Issuance		
Number Date of Issuance Brand Name		
Number Date of Issuance		
Number Date of Issuance Brand Name Model Number 4. REQUIRED INFORMATIO APPLICATION Certified copies of identification docudocument	ON AND DOCUMENTATION TO BE ATTACHED ments such as passport or national identification pration or a valid trade licence in the name of the) ТС
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In his/her capacity as _____ duly authorised and warranting such authority and warranting that the information provided herein

is true and correct, on the _____ day of _____ 20 ____.

Signature
FOR OFFICE USE ONLY
Receiving Officer
Name: Date:
Receipt Number:
APPROVAL STATUS
The equipment MEETS/DOES NOT MEET the Authority's requirements and is hereby GRANTED/NOT GRANTED Type Approval
Granted/Approved □ Rejected/Not Granted □ Type Approval Certificate Number:
Certificate Collection Date:
Collected By:
Name of Issuing Officer:
Comment(s):