To the State Joint-Stock Company “Elektroniskie sakari”

Address: 5 Eksporta Street, Riga, LV-1010, Latvia; e-mail: [vases@vases.lv](mailto:vases@vases.lv)

**Land Mobile Service Portable and Mobile Radio Station Equipment Registration Form**

1. **APPLICANT (legal2** entity or **natural1** person):

|  |  |
| --- | --- |
| Name2 / Name, surname1 | Registration No.2 / personal identity number1 |
| Legal address2 / Declared address1 | Telephone, e-mail2,1 |

1. **Data on radio equipment:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Item | Type (manufacturer, model) | Power (W) | Serial No. | Year of issue | Transmitting (Tx) / receiving (Rx) frequency(s), MHz | Radio station  (mobile / portable) | Call sign |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| 1. **Service area:** |  |

**4.  Type of receipt of licence** In accordance with the Law On Notification, please choose **one** of the methods of receipt and provide the additional information requested:

|  |  |  |
| --- | --- | --- |
| **In the form of an electronic document.** | | |
| 4.1 | By email or official e-address (if you want to receive by e-mail**, specify e-mail address):** |  |
| **In printed document form** | | |
| 4.2 | By post to **(specify address):** |  |
| 4.3 | By using both e-mail and postal services  Send a scanned copy to **(specify e-mail address):**  Send the original by post to **(specify address**): |  |
| 4.4 | In person at the office of the SJSC "Elektroniskie sakari” (5 Eksporta Street, Riga) or via a messenger paid for by the client\*. **Please provide a telephone number for communication:** |  |

\*The licence will be sent to the client's legal address/declared address of residence, if the client/ or the client's representative fails to appear at the office of the SJSC "Elektroniskie sakari” within three business days to receive the prepared document.

**5. Additional information**

|  |
| --- |
| I have been informed that the applicant will be indicated as the addressee of the licence licence. Invoices will be issued to the addressee of the licence. |

**6. SIGNATURE AREA \*** (the application must be signed by the signatory or duly authorised person)

|  |  |  |  |
| --- | --- | --- | --- |
| Place, date | Position | Name, surname | Signature |
|  |  |  |  |

*\*The application must be signed by the legal representative of the legal entity or his/her authorised person. If the application is signed by an authorised person, the application must be accompanied by a duly executed original of the Power of Attorney or a certified copy thereof.*

*\*The document requisite "signature" shall not be completed if the electronic document has been prepared according to the laws and regulations on the execution of electronic documents.*