

Washington Radio Reports (WRR)- Dealer Data Sheet for 2-Way Radio Licenses

1. ___ Name / ___ DBA: (as it should appear on license)

2. Applicant is: COMPANY.____,INDIVIDUAL____,PARTNERSHIP____,ASSOC.____, or GOV'T ENTITY _____

3. Mailing address to be used by FCC and WRR: _____

4. Sponsor Dealership – optional

5. Name of CONTACT PERSON: (print) _____

6. Type of RADIO SERVICE: Business, Manufacturing, Taxicab, etc: _____

7. Is this application NEW_____, MODIFIED_____, or RE-INSTALLED_____

8. Is this license for a BASE_____, MOBILES_____, MOBILE RELAY_____, MOBILE ITINERANT_____, COMMUNITY REPEATER_____, SMR_____ or other _____

9. Number of Control Stations with antenna 20' tall or over _____ (List on separate sheet with same info as #10 below)

Number of Control Stations with antenna 20' tall or UNDER _____

PRIMARY CONTROL POINT _____ Tele # _____

(List street address for each location) _____

10. Base TRANSMITTER location:(a) (if more than one, use separate sheet)

Street address _____ City _____ Country _____ State _____ Zip Code _____

Structure Type: _____ Code _____ Description (See attached sheet or request from WRR)

Height of Support Structure _____ meters. Total height of support structure and antenna _____ meters

Owner of Structure _____ Owners tele # _____ fax # _____

Has FAA been notified? _____ Has tower been registered with FCC? _____ Tower # _____

Latitude ___/___/___ N and Longitude ___/___/___ W (NAD83) Ground Elevation _____ meters

County _____

11. BASE Frequencies: I am requesting ___ VHF ___ UHF or _____ (470+, 800, 900) freq. – Single freq. ___ Pair ___

Please have the coordinator select for me. ___ or submit Base Freq. _____ # units _____ output _____ w ERP _____

Base Freq. _____ # units _____ output _____ w ERP _____

12. MOBILE Frequencies: I am requesting ___ VHF, ___ UHF or (470+, 800, 900) frequencies.

Please have the coordinator select for me. ___ or submit Mobile Freq. _____ #units _____ output _____ w

Mobile Freq. _____ #units _____ output _____ w

13. Number of Portables Vehicle ___ Hand Held ___ Pagers_____ Area of Operations_____ (kilometers, counties, or state)

Required on all Mobile only apps. – Latitude ___/___/___ N Longitude ___/___/___ W (NAD83)

County _____

14. Applicants business activity: We are engaged in the business of: _____

Radios are used for: _____