REPÚBLICA DE MOÇAMBIQUE AUTORIDADE REGULADORA DE AVIAÇÃO CIVIL DE MOÇAMBIQUE Civil Aviation Authority	**APPLICATION FOR AIRCRAFT RADIO STATION INSTALLATION APPROVAL**

Mark the appropriate block for the application Type:

☐ New Application ☐ Application to renew License

License Number:

Expiration Date:

APPLICANT/OPERARTOR

Name:

Address:

AIRCRAFT

Nationality and registration mark of aircraft :

Type and Model designation: Serial number:

Call sign or other identification:

EQUIPMENT INSTALLED

Composition				**Specifications**		
Equipment	Quantity	Mark	Type or model	Power (WATTS)	Emissions Classes	Frequency Range or Frequency Assigned

APPLICANT DECLARATION

I hereby declare that the particulars entered on this application are accurate in every respect and that all the requirements of the Radio Station License have been complied with.

The enclosed fee of _____ is in accordance with the latest Scale of Charges and I agree to be responsible for the payment of any other charges relating to this application.

Print Name	Signature	Date

IACM Use Only : RECOMMENDATION TO ISSUE/RENEW A RADIO STATION LICENSE			
Registration Marks:	Type and Model designation:	Serial number:	Original Issue date:
The above referenced aircraft and its documents have been inspected and evaluated in accordance with the Civil Aviation Regulations currently in force and It is recommended that the Radio Station License be ISSUED / RENEWED.			
IACM Inspector name		Signature	Date

IACM Use Only : RECEIPT	
Fee receipt of payment received (dd-mm-yyyy): Receipt number:	Received by: