

FEDERAL COMMUNICATIONS COMMISSION  
**REMITTANCE ADVICE**  
FORM 159

(1) LOCKBOX #		SPECIAL USE ONLY	
FCC USE ONLY			
SECTION A – PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card)		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents)	
(4) STREET ADDRESS LINE NO.1			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY		(7) STATE	(8) ZIP CODE
(9) DAYTIME TELEPHONE NUMBER (include area code)		(10) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN)		(12) FCC USE ONLY	
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME			
(14) STREET ADDRESS LINE NO.1			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY		(17) STATE	(18) ZIP CODE
(19) DAYTIME TELEPHONE NUMBER (include area code)		(20) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN)		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE		(25A) QUANTITY
(26A) FEE DUE FOR (PTC)	(27A) TOTAL FEE		FCC USE ONLY
(28A) FCC CODE 1		(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE		(25B) QUANTITY
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE		FCC USE ONLY
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D – CERTIFICATION			
<b>CERTIFICATION STATEMENT</b> I, _____, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief.  SIGNATURE _____ DATE _____			
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____  ACCOUNT NUMBER _____ EXPIRATION DATE _____  I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.  SIGNATURE _____ DATE _____			

FEDERAL COMMUNICATIONS COMMISSION <b>REMITTANCE ADVICE (CONTINATION SHEET)</b> FORM 159-C  Page No. ___ of ___		SPECIAL USE
		FCC USE ONLY
<b>USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT</b> <b>SECTION BB – ADDITIONAL APPLICANT INFORMATION</b>		
(13) APPLICANT NAME		
(14) STREET ADDRESS LINE NO.1		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY	(17) STATE	(18) ZIP CODE
(19) DAYTIME TELEPHONE NUMBER (include area code)		(20) COUNTRY CODE (if not in U.S.A.)
FCC REGISTRATION NUMBER (FRN) REQUIRED		
(21) APPLICANT (FRN)		(22) FCC USE ONLY
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET		
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE	(25A) QUANTITY
(26A) FEE DUE FOR (PTC)	(27A) TOTAL FEE	FCC USE ONLY
(28A) FCC CODE 1		(29A) FCC CODE 2
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY
(28B) FCC CODE 1		(29B) FCC CODE 2
(23C) CALL SIGN/OTHER ID	(24C) PAYMENT TYPE CODE	(25C) QUANTITY
(26C) FEE DUE FOR (PTC)	(27C) TOTAL FEE	FCC USE ONLY
(28C) FCC CODE 1		(29C) FCC CODE 2
(23D) CALL SIGN/OTHER ID	(24D) PAYMENT TYPE CODE	(25D) QUANTITY
(26D) FEE DUE FOR (PTC)	(27D) TOTAL FEE	FCC USE ONLY
(28D) FCC CODE 1		(29D) FCC CODE 2
(23E) CALL SIGN/OTHER ID	(24E) PAYMENT TYPE CODE	(25E) QUANTITY
(26E) FEE DUE FOR (PTC)	(27E) TOTAL FEE	FCC USE ONLY
(28E) FCC CODE 1		(29E) FCC CODE 2
(23F) CALL SIGN/OTHER ID	(24F) PAYMENT TYPE CODE	(25F) QUANTITY
(26F) FEE DUE FOR (PTC)	(27F) TOTAL FEE	FCC USE ONLY
(28F) FCC CODE 1		(29F) FCC CODE 2

**ADVICE REFERENCE GUIDE**  
**HOW TO USE FCC FORM 159-REMITTANCE ADVICE**  
**FEBRUARY 2003**

The FCC Form 159, "Remittance Advice," and FCC Form 159-C, (Continuation Sheet) is a multi-purpose form that must accompany any payment to the Federal Communications Commission (e.g., Regulatory Fees, Processing Fees, Auctions, Fines, Forfeitures, Freedom of Information Act (FOIA) Billings, or any other debt due to the FCC). The information on this form is collected to ensure credit for full payment, to ensure you receive any refunds due, to service public inquiries, and to comply with the Debt Collection Improvement Act of 1996.

Note: Fee Filing Guides can be obtained by calling Forms Distribution -- (202) 418-3676 or 1-800-418-3676, or by calling FCC's fax-on-demand -- (202) 418-0177 from the handset of a fax machine.

**Instructions for Completing FCC Form 159 & 159-C**

**NOTE: All required blocks must be completed or it may result in a delay in processing or the return of your application.**

(1) **Lockbox No. #** - Enter the appropriate six-digit P.O. Box Number as found in either the FCC Fee Filing Guide for the service requested, or as specified in the Public Notice.

**SECTION A**

(2) **Payer Name** - Enter the name of the person or company (i.e., maker of the check) making the payment. If using an individual name, enter the last name, first name, and middle initial. If a company, enter the name used commercially. If paying by credit card, enter the name exactly as it appears on your card.

(3) **Total Amount Paid** - Enter the total amount of your remittance.

(4) **Street Address Line 1** - The street address or post office box number to which correspondence should be sent.

(5) **Street Address Line 2** - This line may be used if further identification of the address is required.

(6) **City** - The name of the city associated with the street address given in (4).

(7) **State** - If the payer has a United States mailing address enter the appropriate two-digit state abbreviation as prescribed by the U.S. Post Office. If the payer has a mailing address outside the United States, leave this section blank.

(8) **ZIP Code** - Enter the appropriate five or nine-digit ZIP code prescribed by the U.S. Post Office. If address is foreign, enter the appropriate ZIP (postal) code.

(9) **Daytime Telephone Number** - Enter the payer's ten-digit daytime telephone number, including area code. For foreign telephone numbers include the appropriate country dialing access code, as if you were calling from the United States. This daytime number should be the number where you can be reached during normal business hours.

(10) **Country Code** - This section is for payers who have an address outside the United States of America. Enter the appropriate code here. To obtain country code information, contact the Mailing Requirements Dept. of the U.S. Postal Service.

(11) **Payer (FRN)** - Enter the payer's ten-digit FCC Registration Number (FRN) assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC webpage ([www.fcc.gov.com](http://www.fcc.gov.com)) or by requesting FCC Form 160 through the FCC forms webpage ([www.fcc.gov/formpage.html](http://www.fcc.gov/formpage.html)).

(12) **FCC Use Only**

**(You must complete Section A - Block 11: FCC Registration Number)**

**SECTION B**

**COMPLETE THIS SECTION IF THE PAYER AND APPLICANT ARE DIFFERENT**

(13) **Applicant Name** - Enter the name (last, first, middle initial) as it appears on the original application or filing being submitted. **Applicant** includes Licensees, Regulatees or Debtors. If you are using this form to pay for multiple applicants with a single remittance, each applicant must be listed separately using the continuation sheet - Form 159-C. **(If the name is the same as the payer (block 2), it is not necessary to fill out this section. MOVE TO SECTION C.)**

(14) **Street Address Line 1** - The street address or post office box number to which correspondence should be sent.

(15) **Street Address Line 2** - This line may be used if further identification of the address is required.

(16) **City** - The name of the city associated with the street address given in (14).

(17) **State** - If the applicant has a United States mailing address enter the appropriate two-digit state abbreviation as prescribed by the U.S. Post Office. If the applicant has a mailing address outside the United States, leave this section blank.

(18) **ZIP Code** - Enter the appropriate five or nine-digit ZIP code prescribed by the U.S. Post Office. If address is foreign, enter the appropriate ZIP (postal) code.

(19) **Daytime Telephone Number** - Enter the applicant's ten-digit daytime telephone number, including area code. For foreign telephone numbers include the appropriate country dialing access code, as if you were calling from the United States. This daytime number should be the number where you can be reached during normal business hours.

(20) **Country Code** - This section is for applicants who have an address outside the United States of America. Enter the appropriate code here. To obtain country code information, contact the Mailing Requirements Dept. of the U.S. Postal Service.

(21) **Applicant (FRN)** - Enter the applicant's ten-digit number FRN assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC webpage ([www.fcc.gov.com](http://www.fcc.gov.com)) or by requesting FCC Form 160 through the FCC forms webpage ([www.fcc.gov/formpage.html](http://www.fcc.gov/formpage.html)).

(22) **FCC Use Only**

**(You must complete Section B - Block 21: FCC Registration Number)**

### **SECTION C**

(23) **Call Sign/Other ID** - Enter an applicable call sign or unique FCC identifier, if any, as prescribed by the appropriate FCC Fee Filing Guide or Public Notice.

(24) **Payment Type Code** - Enter the appropriate payment type code for the service you are requesting as found in the appropriate FCC Fee Filing Guide or Public Notice.

**(Incorrect or omitted payment type codes may result in your application or filing being returned to you without further processing.)** You are allowed to file multiple actions on one FCC Form 159. There are three ways "multiple actions" are defined. The following examples provide instructions on how multiple actions should be filed when using FCC Forms 159 & 159-C:

(i) If a single service allows for a quantity of more than one of the same action, as defined in the appropriate FCC Fee Filing Guide or Public Notice, complete Section C (e.g., if you are filing an ownership report in the mass media services you may pay for both your AM & FM stations using the same payment type code and a quantity of two as long as it can be filed in the same lockbox). Blocks **28 & 29** are only to be completed when required by the Bureau/Office or by Public Notice.

(ii) If you are filing concurrent actions (not the same actions) in the same lockbox, on the same application, refer to the appropriate FCC Fee Filing Guide or Public Notice for specific instructions as to the number of quantities allowed. Complete Section C (e.g., you may file a regulatory fee for a CARS license and Broadcast Auxiliary license or you may file a regulatory fee for a mass media service and a common carrier service on the same FCC Form 159 by using the designated payment type codes, and quantities as defined by the Public Notice). Complete a separate item for each action required. Blocks **28 & 29** are only to be completed when required by the Bureau/Office or by Public Notice.

(iii) If a single Remittance Advice is used to pay for more than one applicant, licensee, regulatee or debtor, for permitted action(s) in the same lockbox, then a Continuation Sheet (159-C) must be completed for each applicant, licensee, regulatee or debtor (e.g., if you are paying for different applicants submitting separate Domestic 214 Applications in the common carrier services, they can all be filed on one FCC Form 159 as long as they are filed in the same lockbox). A separate FCC Form 159 must be completed and submitted for each applicant. Blocks **28 & 29** are only to be completed when required by the Bureau/Office or by Public Notice.

Remember, if any of these additional applications fall into category (i) or (ii) above, you can follow those instructions. Make sure to check the appropriate FCC Fee Filing Guide or Public Notice for any special filing stipulations that may apply.

(25) **Quantity** - Enter the total number of actions required with this submission. Refer to the FCC Fee Filing Guide or Public Notice for information concerning multiple requests.

(26) **FEE Due for (PTC)** - Enter the fee due for the PTC listed in item 24.

(27) **Total Fee** - Enter the total fee due by multiplying Block 25 (Quantity) times Block 26 (Fee Due for PTC).

(28) **FCC Code 1** - This section is used for special filing codes as required by the Bureau/Office or Public Notice. Do not complete this block unless instructed to do so.

(29) **FCC Code 2** - This section is used for special filing codes as required by the Bureau/Office or Public Notice. Do not complete this block unless instructed to do so.

## **SECTION D**

(30) **Certification Statement** - This section must be completed and signed. Failure to do so may delay the processing of your application/filing.

## **SECTION E**

(31) **Credit Card Payment Information** - If remitting payment by credit card, place an "x" in the appropriate block for the credit card being used - MasterCard, Visa, AMEX, or Discover. Enter your credit card number and expiration date (For example: (mm/yyyy)). Sign and date the FCC Form 159 to authorize your credit card payment. (If any area required for credit card approval is incomplete, the application will be returned unprocessed.)

## **Form 159-C FCC Remittance Advice Continuation Sheet**

Use this form for any additional services pertaining to this filing or if you are paying for multiple applicants with a single payment. (See Sections B and C of the instructions to assist you in completing this form). For each additional applicant listed in Section BB of the FCC Form 159-C, you must complete Section BB - Block 21: FCC Registration Number. Each additional applicant must use a separate Form 159-C.

**Note: Checks must be denominated in U.S. Currency and deposited in an U.S. financial institution. No checks drawn on a foreign bank will be accepted.**

## **NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1995**

The solicitation of the personal information requested in this form is authorized by the Communications Act, Sections 8 & 9, and the Debt Collection Improvement Act of 1996. P.L. 104-134. This form will be used primarily to capture information to maintain required accounts receivable, and collect fines and debts due the Commission. As part of the Debt Collection Improvement Act, agencies are authorized to refer specific Taxpayers Identification information which includes Employers Identification Numbers and Social Security Numbers to the Department of Treasury for further investigation and possible enforcement of a statute, rule, regulation or order. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding. If information requested on the form is not provided, processing of the application/filing may be delayed or returned without action pursuant to Commission rules.

If you owe a past due debt to the Federal Government, the Taxpayer Identification Number (such as your Social Security Number) and other information you provide may also be disclosed to the Department of the Treasury, Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized.

We have estimated that each response to this collection of information will take 10 minutes to 4 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually review and complete the form. If you have any comments on this estimate, or on how we can improve the collection of this data to reduce the burden it causes you, please write the Federal Communication Commission, AMD-PERF, Washington, DC 20554, Paperwork Reduction Project (3060-0589). We will also accept your comments via the Internet if you send them to pra@fcc.gov. Please **DO NOT SEND COMPLETED APPLICATION FORMS TO THIS ADDRESS.**

Remember -- You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0589.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e) (3) and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.

September 2005

FEDERAL COMMUNICATIONS COMMISSION  
Commission Registration System (CORES)  
FORM 160 – CORES Registration Form

FCC USE ONLY

#

1. Entity Type: \_\_\_\_\_

2. Business Entity Type (if applicable): \_\_\_\_\_

3. Business Entity Name: \_\_\_\_\_

3a. Salutation: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

4. Doing Business or Trading As: \_\_\_\_\_

5. Taxpayer Identification Number / Social Security Number (9 digits): \_\_\_\_\_

6. Taxpayer Identification Number Exception Reason Code: \_\_\_\_\_

7. Contact Representative Organization/Company: \_\_\_\_\_

8. Contact Representative Position/Title: \_\_\_\_\_

9. Contact Representative First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Contact Representative Last Name: \_\_\_\_\_

10. Address: \_\_\_\_\_

11. Address 2: \_\_\_\_\_

12. Address 3: \_\_\_\_\_

13. Address 4: \_\_\_\_\_

14. City: \_\_\_\_\_ 15. State: \_\_\_\_\_ 16. Zip Code: \_\_\_\_\_ - \_\_\_\_\_

17. Country: \_\_\_\_\_

18. Contact Representative Phone Number: \_\_\_\_\_ 19. FAX: \_\_\_\_\_

20. Contact Representative E-Mail: \_\_\_\_\_

21. Personal Security Question (select only one): 21a. Custom Personal Security Question (if applicable): \_\_\_\_\_

\_\_\_\_ Mother's Maiden Name

\_\_\_\_ City of Birth

\_\_\_\_ Favorite Pet's Name

\_\_\_\_ Corporate Internal Employee ID

\_\_\_\_ Custom Personal Security Question

22. Personal Security Question Answer: \_\_\_\_\_

23. Certification Statement: I, \_\_\_\_\_, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information, and belief.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## ADVICE REFERENCE GUIDE HOW TO USE FCC FORM 160-(CORES) REGISTRATION FORM

The FCC Form 160, *CORES Registration Form*, is a form that must be completed to obtain a FCC Registration Number (FRN). The FCC Registration Number will be assigned by the Commission Registration System (CORES) and is required for anyone doing business with the Commission (feeable and non-feeable). The information on this form is collected to ensure you receive any refunds due, to service public inquiries, and to comply with the Debt Collection Improvement Act of 1996.

*The FRN can be obtained electronically through the FCC webpage: [www.fcc.gov/frnreg](http://www.fcc.gov/frnreg).*

### Instructions for Completing FCC Form 160

**NOTE: All required blocks must be completed or it may result in a delay in processing or the return of your application. All blocks are required unless otherwise stated.**

**(1) Enter the Entity Type from the codes below:**

01 - Individual	02 - Private Sector
03 - Federal	04 - State
05 - Local	06 - Foreign

**(2) Enter Business Entity Type (only respond if you selected 02 - Private Sector in Number (1) above):**

01 - Corporation	02 - University	03 - Partnership	04 - LLC
05 - Attorney	06 - Joint Venture	07 - Trust	08 - Association
09 - Consortium	10 - Amateur Club	11 - Non-Profit/Exempt Organization	

**(3) Business Entity Name (only applicable to businesses):** Enter the entity name or company used commercially.

**(3)(a) Entity Name (only applicable to individuals):** Enter the name of the individual registrant. Enter the first name and last name, as well as the salutation, middle initial, and suffix if necessary.

**(4) Doing Business As/Trading As (optional):** Enter Doing Business As or Trading As name. (Only if individual entity)

**(5) Taxpayer Identification Number / Social Security Number:** Enter the entity's nine-digit Taxpayer Identification Number (TIN). The Taxpayer Identification Number will either be an Employer Identification Number (EIN) or Social Security Number (SSN) of the payer as reported to the Internal Revenue Service. If you **do not** have a (TIN), complete Block 6.

**(6) Enter Taxpayer Identification Number exception reason code (if applicable; see (5) above):**

<u>Code</u>	<u>Reason Type</u>	<u>Explanation</u>
01	- <i>TIN Applied For:</i>	Entity is currently applying for a TIN, but has not yet received one.
02	- <i>Entity is Foreign:</i>	Entity is not required to have a TIN due to a foreign status under IRS rules.
03	- <i>Entity is Petitioner:</i>	Entity has contact with the FCC only as a petitioner.
04	- <i>Exempt Activities:</i>	Entity is exempt under Internal Revenue Service (IRS) rules from obtaining a TIN.
05	- <i>Amateur Club:</i>	Entity is a non-profit amateur radio club. (only applicable to businesses)
06	- <i>Tribal government or entity:</i>	Entity is a tribal government or similar organization within the U.S. (only applicable to businesses)

**(7) Contact Representative Organization/Company (optional):** Enter the name of the contact representative organization or company. A contact representative is the individual who will be contacted with any business concerning this FRN.

**(8) Contact Representative Position/Title (only applicable to businesses):** Enter the contact representative title.

**(9) Contact Representative Name:** Enter the name of the contact representative. Enter the first name, middle initial and last name.

- (10) **Address:** The street address to which correspondence should be sent.
- (11) **Address 2 (optional):** This line may be used if further identification of the address is required.
- (12) **Address 3 (optional):** This line may be used, if necessary, for an address outside the United States of America.
- (13) **Address 4 (optional):** This line may be used, if necessary, for an address outside the United States of America.
- (14) **City:** The name of the city associated with the street address given in (10).
- (15) **State (Domestic Addresses only):** If the contact representative has a United States mailing address enter the appropriate two-digit state abbreviation as prescribed by the U.S. Post Office. If the contact representative has a mailing address outside the United States, leave this section blank.
- (16) **ZIP Code (Domestic Addresses only):** Enter the appropriate five or nine-digit ZIP code prescribed by the U.S. Post Office. If address is foreign, enter the appropriate ZIP (postal) code. (Domestic address only)
- (17) **Country (International Addresses only):** If the contact representative has a mailing address outside the United States, enter the appropriate country.
- (18) **Contact Representative Daytime Telephone Number (optional for individuals):** Enter the contact representative's ten-digit daytime telephone number, including area code. For foreign telephone numbers include the appropriate country dialing access code, as if you were calling from the United States. This daytime number should be the number where you can be reached during normal business hours.
- (19) **Contact Representative Fax Number (optional):** Enter the contact representative's ten-digit fax number, including area code. For foreign fax numbers include the appropriate country dialing access code, as if you were calling from the United States.
- (20) **Contact Representative E-mail Address (optional):** Enter the contact representative's e-mail address.
- (21) **Personal Security Question:** Select your Personal Security Question. In the event that you forget your CORES password, your Personal Security Question and answer will be used to verify your identity. If you are not satisfied with any of the Personal Security Questions on the list, select Custom Personal Security Question and provide us with your own question in 21a.
- (21)(a) **Custom Personal Security Question:** If you selected Custom Personal Security Question in (21), provide your own Personal Security Question here. (Maximum 100 characters, including spaces)
- (22) **Personal Security Question Answer:** Provide the answer to the Personal Security Question you had previously specified in (21). (Maximum 60 characters, including spaces)
- (23) **Certification Statement:** Read the certification statement and provide your signature if you agree to the stated claim.

**Send completed forms to:**

FCC

Attention: CORES Administrator

Room: 2-A629

445 12th St, SW

Washington, DC 20554

**NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1995**

The solicitation of the personal information requested in this form is authorized by the Communications Act, Sections 8 & 9, and the Debt Collection Improvement Act of 1996. P.L. 104-134. This form will be used primarily to capture information to maintain required accounts receivable, and collect fines and debts due the Commission. As part of the Debt Collection Improvement Act, agencies are authorized to refer specific Taxpayers Identification information which includes Employers Identification Numbers and Social Security



Numbers to the Department of Treasury for further investigation and possible enforcement of a statute, rule, regulation or order. If we believe there may be a violation or potential violation of an FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding. If information requested on the form is not provided, processing of the application/filing may be delayed or returned without action pursuant to Commission rules.

If you owe a past due debt to the Federal Government, the Taxpayer Identification Number (such as your Social Security Number) and other information you provide may also be disclosed to the Department of the Treasury, Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized.

We have estimated that each response to this collection of information will take, on average, 15 minutes. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually review and complete the form. If you have any comments on this estimate, or on how we can improve the collection of this data to reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERF, Washington, DC 20554, Paperwork Reduction Project (3060-0917). We will also accept your comments via the Internet if you send them to [Judith-B.Herman@fcc.gov](mailto:Judith-B.Herman@fcc.gov). Please **DO NOT SEND COMPLETED APPLICATION FORMS TO THIS ADDRESS**.

Remember -- You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0917.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e) (3) and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.

**Quick-Form Application for Authorization in the Ship, Aircraft, Amateur,  
Restricted and Commercial Operator,  
and General Mobile Radio Services**

**NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND  
THE PAPERWORK REDUCTION ACT OF 1995**

We have estimated that each response to this collection of information will take on average .44 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERF, Washington, DC 20554, Paperwork Reduction Project (3060-0850). We will also accept your comments via the Internet if you send them to [PRA@fcc.gov](mailto:PRA@fcc.gov). *Please do not send completed application forms to this address.*

You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection unless it displays a currently valid OMB control number with this notice. This collection has been assigned OMB control number 3060-0850.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of a statute, FCC regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding.

All parties and entities doing business with the Commission must obtain a unique identifying number called the FCC Registration Number (FRN) and supply it when doing business with the Commission. Failure to provide the FRN may delay the processing of the application. This requirement is to facilitate compliance with the Debt Collection Improvement Act of 1996 (DCIA). The FRN can be obtained electronically through the FCC webpage at <http://wireless.fcc.gov/uls> (click on CORES/CALL SIGN REGISTRATION) or by manually submitting FCC Form 160. FCC Form 160 is available from the FCC's web site at <http://www.fcc.gov/formpage.html>, or from Federal Communications Commission Fax Information System by dialing (202) 418-0177.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e)(3) and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.



## Overview

### Purpose of Form

Form FCC 605 is a multi-purpose form. It is used to apply for an authorization to operate radio stations, amend pending applications, modify existing licenses, and perform a variety of other miscellaneous transactions (refer to page 4 and 5 of these instructions for a detailed list) in the Wireless Telecommunications Bureau (WTB) radio services. This includes the Ship Radio, Aircraft Radio, Amateur Radio, Restricted and Commercial Operator Radio, and the General Mobile Radio [GMRS] Services. The purpose of this form is to collect data pertaining to the proposed request. This data is used by the FCC to determine whether the public interest would be served by a grant of the request.

### Introduction

FCC Form 605 is a multi-part form comprising a main form and several schedules. Each application or amendment must contain only one Main Form (Pages 1 and 2).

### Main Form

The purpose of the Main Form is to obtain information sufficient to identify the filer and establish the filer's basic eligibility and qualifications. The Main Form also contains the required certification and signature block. The Main Form is required for every application or amendment filed on FCC Form 605.

### Schedules

The purposes of the optional schedules are as follows:

#### **Schedule A**

The Schedule for Changes Affecting Multiple Call Signs or File Numbers is used to submit global changes to items on the FCC 605 Main Form that affect either multiple call signs or multiple file numbers.

#### **Schedule B**

The Schedule for Additional Data for the Ship Radio Service (47 CFR Part 80) is used to submit the required additional parameters for ship stations including search & rescue information. This schedule is used in conjunction with the Main Form.

#### **Schedule C**

The Schedule for Additional Data for the Aircraft Radio Service (47 CFR Part 87) is used to submit the required additional parameters for aircraft stations. This schedule is used in conjunction with the Main Form.

#### **Schedule D**

The Schedule for Additional Data for the Amateur Radio Service (47 CFR Part 97) is used to submit the required additional parameters for amateur stations. This schedule is used in conjunction with the Main Form.

#### **Schedule E**

The Schedule for Additional Data for Commercial Radio Operators, Restricted Radiotelephone, and Restricted Radiotelephone-Limited Use Radio Services (47 CFR Part 13) is used to submit the required additional parameters for these licenses and permits. This schedule is used in conjunction with the Main Form.

#### **Schedule F**

The Temporary Operator Permit for the Ship, Aircraft, Restricted Radiotelephone, Restricted Radiotelephone-Limited Use, and GMRS Radio Services is used to obtain a Temporary Operator Permit while the Applicant's application is being processed by the Commission. This schedule can only be completed and retained by the Applicant upon submission of a completed and signed FCC 605 Main Form and appropriate Additional Data Schedule to the FCC.

#### **Schedule G**

The Schedule for Exemption From Ship Station Requirements is used to supply information for exemption in the Ship Radio Service (Part 80.59c). This schedule is used in conjunction with the Main Form.

### **Schedules Required**

If you are applying for an authorization which requires you to report additional data, file the additional data schedule appropriate to the service for which you are applying along with the FCC 605 Main Form: <b>Service</b>	ULS Form/Schedule Title
Ship Radio Service (47 CFR Part 80)	Main Form 605 - Quick-Form Application for Authorization Schedule B - Schedule for Additional Data for the Ship Radio Service
Waiver request for Exemption from Ship Station Requirements	Main Form 605 - Quick-Form Application for Authorization Schedule G – Exemption from Ship Station Requirements
Aircraft Radio Service (47 CFR Part 87)	Main Form 605 - Quick-Form Application for Authorization Schedule C - Schedule for Additional Data for the Aircraft Radio Service
Amateur Radio Service (47 CFR Part 97)	Main Form 605 - Quick-Form Application for Authorization Schedule D - Schedule for Additional Data in the Amateur Radio Service
Commercial Radio Operator, Restricted Radiotelephone, and Restricted Radiotelephone-Limited Use Radio Services (47 CFR Part 13)	Main Form 605 - Quick-Form Application for Authorization Schedule E - Schedule for Additional Data for the Commercial Radio, Restricted Radiotelephone, and Restricted Radiotelephone-Limited Use Radio Services
General Mobile Radio Service [GMRS] (47 CFR Part 95)	Main Form 605 - Quick-Form Application for Authorization

# General Filing Instructions

## **Information Current and Complete**

Information filed with the FCC must be kept current and complete. The Applicant must notify the FCC regarding any substantial and significant changes in the information furnished in the application(s). See Section 1.65 of the Commission's Rules.

## **Applicable Rules and Regulations**

Applicants should obtain the relevant parts of the FCC's rules in 47 CFR. Copies of 47 CFR may be purchased from the Superintendent of Documents; Government Printing Office; Washington, DC 20402; (202) 512-1800. Refer also to the Government Printing Office's web site at <http://www.access.gpo.gov>.

## **Processing Fee and Filing Locations**

A processing fee may be required with this form. The fee amounts are not specified on this form because they are reviewed and updated on an annual basis. The fee amounts are provided in separate documents as follows:

Refer to Subpart G of Part 1 of the Code of Federal Regulations (47 CFR Part 1, Subpart G), the current Fee Filing Guide, **or** FCC Form 1070Y. FCC Form 1070Y provides the fee information specifically for Form 605. For assistance with fees applicable to the radio services governed by the FCC's rules, call (877) 480-3201 (TTY 717-338-2824). If you are required to submit payment with your manually filed application, you will also need FCC Form 159 (Fee Remittance Advice). The Fee Filing Guide, FCC Form 159 and FCC Form 1070Y can be downloaded from the FCC's web site at <http://www.fcc.gov/formpage.html>, or from FCC's Fax Information System by dialing (202) 418-0177.

**Paper applications requiring a fee** must be mailed to Federal Communications Commission, P. O. Box 979097, St. Louis, MO, 63197-9000 or hand delivered to the U.S. Bank, Attn: FCC Government Lockbox #979097, SL-MO-C2-GL, 1005 Convention Plaza, St. Louis, MO 63101.

**Non-feeable paper applications** should be mailed to Federal Communications Commission, 1270 Fairfield Road, Gettysburg, PA 17325-7245. Hand-deliveries and messenger-deliveries should be delivered to Federal Communications Commission, 1280 Fairfield Road, Gettysburg, PA 17325.

**Information on electronic filing is provided on Page 4 of these instructions.**

## **Packages**

If filing manually, the Main Form and the applicable schedules should be submitted as one package, stapled in the upper left corner. The Main Form should be first with the schedules attached in alphabetical order. Applicants filing electronically are not required to submit paper copies.

## **Paper Copies**

The number of paper copies of this application required to be filed is one original. Applicants filing electronically are not required to submit paper copies.

## **Exhibits**

Each document required to be filed as an exhibit should be current as of the date of filing. Each page of every exhibit must be identified with the number or letter of the exhibit, the number of the page of the exhibit, and the total number of pages of the exhibit. If material is to be incorporated by reference, see the instruction on incorporation by reference.

## **Incorporation by Reference**

You may incorporate by reference documents, exhibits, or other lengthy showings already on file with the FCC only if: the information previously filed is more than one 8½" by 11" page in length, and all information therein is current and accurate in all significant respects; the reference states specifically where the previously filed information can be found (*i.e.*, station call sign and application file number, title of proceeding, docket number and legal citations), including exhibit and page references. Use the relevant item number followed by 'A'. Items that call for numbers, or which can be answered 'Y' or 'N' or other short answers must be answered directly without reference to a previous filing.

## **Waiver Requests**

Requests for waiver must contain as an exhibit a statement of reasons sufficient to justify a waiver. The required showing must be made for all rule waivers desired, identifying the specific rules or policies for which the waiver is requested. Refer to the current Fee Filing Guide for fee requirements for waivers. For assistance with fees applicable to the radio services governed by the FCC's rules, call (877) 480-3201 (TTY 717-338-2824), or visit the web at <http://esupport.fcc.gov>.

### **English to Metric Conversions**

All distances must be provided as metric values. The following English to Metric equivalent should be used to convert distances (rounded to the nearest tenth), where necessary:

1 foot = 0.3048 meter

### **For Assistance**

For assistance with this application, contact the Federal Communications Commission, call (877) 480-3201 (TTY 717-338-2824), or visit the web at <http://esupport.fcc.gov>.

### **Electronic Filing**

To file an application electronically, visit the FCC's Internet site at <http://wireless.fcc.gov/uls> and select Online Filing. Interactive instructions are provided for filing payment for an electronically filed application, including the amount and a Fee Remittance Advice. On-line payment with a credit card is also available. For technical assistance with filing electronically call (877) 480-3201.

In instances where an Applicant files electronically and needs to include an exhibit(s) with the application and cannot transmit that exhibit(s) to the FCC electronically, the Applicant may mail exhibits to the following address: Federal Communications Commission, Application Exhibit, 1270 Fairfield Road, Gettysburg, PA 17325-7245. Hand deliveries and messenger deliveries should be delivered to Federal Communications Commission, 1280 Fairfield Road, Gettysburg, PA 17325. Each exhibit should be clearly labeled with the Applicant's name, the 10-digit file number assigned to the application at the time of submission, and the type of exhibit (e.g. waiver request).

## **Instructions for Form FCC 605 Main Form**

FCC Form 605, Main Form, is used to obtain information sufficient to identify the filer and the purpose of the filing. The Main Form is required for every application or amendment filed on FCC Form 605. Regardless of Purpose of Application, all items on the Main Form must be completed according to the instructions below.

### **Radio Service Code**

**Item 1** You must enter the Radio Service Code for which the Applicant is filing or presently holds a license by inserting the appropriate two-letter code from the following list:

#### **Ship Radio Service (47 CFR Part 80)**

Ship Recreational or Voluntarily Equipped.....	SA
Ship Compulsory Equipped .....	SB
Ship Exemption.....	SE

#### **Aircraft Radio Service (47 CFR Part 87)**

Aircraft.....	AC
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#### **Amateur Radio Service (47 CFR Part 97)**

Amateur .....	HA
Vanity.....	HV

#### **Commercial Radio Operators Services (47 CFR Part 13)**

Restricted Radiotelephone .....	RR
Restricted Radiotelephone-Limited Use.....	RR
Commercial .....	CM

#### **General Mobile Radio Service (47 CFR Part 95)**

General Mobile Radio Service .....	ZA
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### **Application Purpose**

**Item 2** You must indicate the purpose for which the application is being filed by inserting the appropriate two-letter abbreviation from the following list. Only one purpose may be specified. For the General Mobile Radio Service [GMRS], effective January 1, 1989, 'new' or 'major modifications' may not be filed by business Applicants/Licensees.

**NE - New:** To request a new license. This purpose should only be used for initial applications. A change in vessel constitutes a need for a new license. A change in aircraft constitutes a need for a new license unless you are requesting a Transfer of Control or Assignment of Authorization of an aircraft license, in which case you must file FCC Form 603. Amateur applications with the purpose of NEW must be filed by a Volunteer Examiner Coordinator. **NOTE: SHIP EXEMPTION REQUESTS (SCHEDULE G) SHOULD BE FILED AS NEW AND PROVIDE CALL SIGN IN ITEM 5.**

**MD - Modification:** To request a change in the conditions of any data for a license during the term of that license. Use Item 5 to provide the call sign (serial number for Commercial Operator License) of the affected station. The appropriate schedule must be completed and attached, and must accurately describe the data that has been modified. See applicable Commission Rules. Choose purpose MD if you are requesting consolidation of DO and DM (Commercial Operator). **Choose purpose MD if you are requesting a new systematic call sign be issued to you (Amateur operator).**

**Note:** After a license is modified, the FCC will issue a new license and previous versions of the license will no longer be valid, regardless of the expiration date shown. License terms will not be extended as a result of an application for Modification.

**Note:** If the only changes desired are to administrative data, use the Administrative Update purpose instead of Modification (see Administrative Update purpose below for further description of administrative updates).

**RM - Renewal/Modification:** To renew (within the specified renewal time frame, must be filed no later than expiration date of the authorization and no sooner than 90 days prior to expiration date) an existing authorization and request a change in the conditions for that authorization. Use Item 5 to provide the call sign (serial number for Commercial Operator License) of the affected station. The appropriate schedule must be completed and attached, and must accurately reflect the data that has been modified. If you wish to consolidate DO and DM (Commercial Operator) licenses and renew at the same time, choose purpose RM.

#### **Simple Application Purpose & Requirements for Paper Submission on FCC 605**

**RO - Renewal Only:** To renew an existing authorization within the specified renewal time frame (must be filed no later than expiration date of the authorization and no sooner than 90 days prior to expiration date) where **no changes** in the conditions are being requested at the time of renewal. (To make any modifications to your existing authorization, use the Renewal/Modification purpose.)

#### **Mandatory items required for submission of “RO” purpose are as follows:**

- Item 1) Radio Service Code
- Item 2) Application/Licensee Purpose
- Item 5) Call Sign/Serial # (if filing for multiple Call Signs/Serial #s,  
list additional call signs/serial #s on Schedule A)
- Item 9) FCC Registration Number (FRN)
- Items 26 & 27) Fee Status
- Items 29, 30 & 31) Signature and Date

**Optional Items:** Item 6) Requested Authorization Expiration Date  
MM/DD

**NOTE:** To renew an existing STA, you must select purpose of ‘RM’ and enter the appropriate Call Sign in Item 5.

**DU - Duplicate License:** To request a hard copy duplicate of an existing license(s).

#### **Mandatory items required for submission of “DU” purpose are as follows:**

- Item 1) Radio Service Code
- Item 2) Application Purpose
- Item 5) Call Sign/Serial # (if filing for multiple Call Signs/Serial #s,  
list additional call signs/serial #s on Schedule A)
- Item 9) FCC Registration Number (FRN)
- Items 26 & 27) Fee Status
- Items 29, 30 & 31) Signature and Date

**Note:** Requests for a Duplicate/Replacement Restricted Radiotelephone Operator Permit licensed prior to May 21, 2001 should be filed as purpose New (NE) and Schedule E will also be required.

**AM - Amendment:** To amend a previously-filed, currently pending application(s). Use Item 4 to provide the File Number(s) of the affected pending application(s). The appropriate schedule must be completed and attached, and must accurately reflect the amended data. See applicable Commission Rules.

**AU - (No Fee Required) Administrative Update:** To request a change of any administrative data on a license such as Licensee name (without a change in ownership, control or corporate structure), mailing address, telephone and or fax numbers, e-mail address, name of vessel and FAA Registration Number due to FAA change.

**Mandatory items required for submission of “AU” purpose are as follows:**

- Item 2) Application Purpose
- Item 5) Call Sign/Serial # (if filing for multiple Call Signs/Serial #s,  
list additional call signs/serial #s on Schedule A)
- Item 9) FCC Registration Number (FRN)
- Items 29, 30 & 31) Signature and Date

**One or more of the following items may be corrected with “AU” purpose:**

- Item 11) Licensee Name (without a change in ownership) (also answer Item 13)
- Item 12) Entity Name (without a change in ownership, control  
or corporate structure) (also answer Item 13)
- Item 13) Sale (or Transfer of Control) **(for name change only)**
- Items 14 through 20) Mailing Address
- Item 21) Telephone Number
- Item 22) FAX Number
- Item 23) E-Mail Address
- Item 24) Vessel Name (applicable to Radio Service Codes SA or SB only)
- Item 25) New FAA Registration number due to FAA change

Use Item 5 to provide the call sign (serial number for Commercial Operator License) of the affected station.

**CA** – (No Fee Required) Cancellation of License: To cancel an existing license.

**Mandatory items required for submission of “CA” purpose are as follows:**

- Item 2) Application Purpose
- Item 5) Call Sign/Serial # (if filing for multiple Call Signs/Serial #s,  
list additional call signs/serial #s on Schedule A)
- Item 9) FCC Registration Number (FRN)
- Items 29, 30 & 31) Signature and Date

**WD** - (No Fee Required) Withdrawal of Application: To withdraw a previously filed, currently pending application(s).

**Mandatory items required for submission of “WD” purpose are as follows:**

- Item 2) Application Purpose
- Item 4) File Number (if filing for multiple File Numbers,  
list additional File Numbers on Schedule A)
- Item 9) FCC Registration Number (FRN)
- Items 29, 30 & 31) Signature and Date

***No fee is required for Governmental Entities. Send non-feeable packages to:***

***Federal Communications Commission  
1270 Fairfield Road  
Gettysburg, PA 17325-7245***

**Item 3** If the filing is a request for a Special Temporary Authorization (STA), enter 'Y'. Otherwise, enter 'N'.

In emergencies or other urgent conditions requiring immediate or temporary use of facilities, request may be made for special temporary authority (STA) to install and/or operate new or modified equipment, subject to the appropriate requirements governing Special Temporary Authorizations contained in the FCC rules. If Item 3 is answered 'Y', attach an exhibit including the following information: description of the nature of the extraordinary circumstance, equipment to be used, type of operation to be conducted, explanation of how the facilities will be used, times and dates of operation, and a list of airports and/or ports that will be visited.

**Note:** Special Temporary Authorizations are applicable only to Ship and Aircraft Applicants/Licensees. To file an initial request for an STA, Applicants/Licensees should select an application purpose of NE - New in Item 2 and then answer Item 3 as appropriate. STAs are granted for a maximum of 180 days. If another STA is needed, Applicants/Licensees may file by selecting application purpose of RM - Renewal/Modification and supply the appropriate Call Sign in Item 5 or by selecting application purpose NE - New. The renewal/modification purpose is provided for the convenience of the Applicant/Licensee (the Applicant/Licensee will retain the same call sign if the STA request is granted).

**Item 4** If the filing is a request for an Amendment or Withdrawal of a previously-filed currently pending application, provide the file number of the original application. This information can be obtained by contacting the FCC at (877) 480-3201 (TTY 717-338-2824) or by using Search Applications function available at <http://wireless.fcc.gov/uls>. If the amendment or withdrawal affects multiple file numbers, complete and attach Schedule for Changes Affecting Multiple Call Signs or File Numbers, Form FCC 605, Schedule A.

**Item 5** If the filing is a request for a modification, renewal only, renewal/modification, cancellation, duplicate, or administrative update of an existing license, enter the Call Sign (serial number for Commercial Operator) of the affected license in item 5. If the filing is a request for a renewal only, cancellation or duplicate of an existing license(s), enter the Call Sign(s) (serial number for Commercial Operator) of the affected license(s) in item 5. This information can be obtained by contacting the FCC at (877) 480-3201 (TTY 717-338-2824) or by using the Search Licenses function available at <http://wireless.fcc.gov/uls>. If the request affects multiple call signs (serial numbers for Commercial Operator), complete and attach Schedule for Changes Affecting Multiple Call Signs or File Numbers, Form FCC 605, Schedule A. If filing a request to consolidate DO and DM operator classes, enter DO serial number in item 5.

**Item 6** This item is optional. If the filing is a request for a New, Amendment, Renewal Only, or a Renewal/Modification, enter the requested authorization expiration date. Applicants/Licensees may, if desired, request the month and day of license expiration. However, in no cases will licenses be granted for terms that exceed the license term as governed by the rules for each service.

**Item 7** If the filing is requesting a Waiver or Exception of the Commission's Rules, enter 'Y'; otherwise, enter 'N'. If item 7 is answered 'Y', attach an exhibit including a statement of reasons sufficient to justify a waiver. The required showing must be made for all rule waivers desired, identifying the specific rules or policies for which the waiver is requested. Refer to the current Fee Filing Guide for fee requirements for waivers. For assistance with fees applicable to the radio services governed by the FCC's rules, call or (877) 480-3201 (TTY 717-338-2824).

**Item 8** Enter 'Y' if attachments (other than associated schedules) are being filed with this application. Otherwise, enter 'N'.

### **Applicant/Licensee Information**

Items 9 through 23 identify the Applicant/Licensee. If an authorization is granted, the information provided will become the Licensee's name, address, and telephone number of record. The FCC will send the authorization and notice of all final dispositions of an application to this address. Failure to provide the FCC with a current and valid mailing address in the United States (except for Restricted Radiotelephone Operator Permits), and the subsequent failure to respond to FCC correspondence sent to the specified address may result in dismissal of an application, and/or liability for forfeiture, or revocation of your authorization to operate a radio station. **Ship Exemptions must file under present Licensees information.**

**Item 9** FCC Registration Number (FRN) – This item must be completed. Enter your ten digit FRN assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC webpage at <http://wireless.fcc.gov/uls> (click on CORES/CALL SIGN REGISTRATION) or by manually submitting FCC Form 160. FCC Form 160 is available for downloading from <http://www.fcc.gov/formpage.html> or from Federal Communications Commission Fax Information System by dialing (202) 418-0177. **Note:** Licensees should then associate their WTB call sign(s) electronically at <http://wireless.fcc.gov/uls> (click on CORES/CALL SIGN REGISTRATION) or by manually submitting FCC Form 606. FCC Form 606 can also be obtained from any of the aforementioned locales as FCC Form 160.

**Item 10** This item indicates the legal entity type of the Applicant. Select Individual, Corporation, Unincorporated Association, Trust, Government Entity, Consortium, General Partnership, Limited Liability Company, Limited Liability Partnership, Limited Partnership, or Other. When selecting 'Other', provide a description of the legal entity.

**Note:** For GMRS: effective January 1, 1989, new or major modification applications may NOT be filed by non-individual (business) Applicants/Licensees. (See Rule 1.929(c) (4) & 95.5(b).

**Items 11 and 12** If Item 10 is 'I' (for Individual), you must enter the name of the individual person applying in Item 11. Otherwise, you must enter the name of the entity in Item 12. If either Item 11 or 12 is being updated, you must answer Item 13.

**Item 13** If the Licensee name is being updated, you must answer item 13. Check 'N' if the Licensee name is not the result from the sale (or transfer of control) of the license(s) to another party. If checking 'Y', you must file for a new license.

**Items 14-21** Enter the name, address, and telephone number of the person to whom the FCC should send correspondence. All Applicants/Licensees, except Applicants applying for a Restricted Radiotelephone Operator Permit, must specify an address where the Applicant/Licensee can receive mail delivery by the United States Postal Service.

You may enter a post office box number in Item 15 or a street address in Item 16, or enter information for both items. Enter the City, State, and Zip Code/Postal Code in Items 17, 18, and 19, respectively. Applicants for Restricted Radiotelephone Operator Permits who do not have a United States mailing address must specify a Country in Item 20. Refer to FCC 605 Main Form Instructions, Appendix I, for a list of valid state, jurisdiction, and area abbreviations. Enter a telephone number (optional), including area code, in Item 21.



Items 22 and 23 Enter the Applicant's/Licensee's fax number and email address, if desired and available.

### **Ship Applicants/Licensees Only**

Item 24 For Administrative Update purposes only, enter the new name of the vessel.

### **Aircraft Applicants/Licensees Only**

Item 25 Due to Federal Aviation Administration change, enter the new FAA Registration Number (the N-number).

**NOTE:** Do not enter the leading 'N'.

### **Fee Status**

Items 26-27 These items allow the Applicant/Licensee to apply for exemption from FCC application fees and regulatory fees. See the current Fee Filing Guide, FCC Form 1070Y or call (877) 480-3201 (TTY 717-338-2824).

### **Basic Qualifications**

Item 28 This item enables the FCC to determine whether an Applicant is eligible under §§ 310(d) and 308(b) of the Communications Act of 1934, as amended, to hold or have ownership interest in a station license. Applicants are required to answer this questions only if 1) they are filing FCC Form 605 for one of the following purposes indicated in Item 2: New, Amendment, Modification, or Renewal/Modification; and 2) the answers have changed from those previously provided. Applicants using FCC Form 605 for any other purpose are not required to answer this question. If the answer to item 28 'Y', attach as an exhibit a statement explaining the circumstances and a statement giving the reasons why the Applicant believes that grant of the application would be in the public interest notwithstanding the actual or alleged misconduct. If the Applicant responds 'Y' to this question and has previously provided a statement and explanation regarding the circumstances as an attachment to a prior application filed in ULS, and the facts and circumstances are unchanged, the Applicant may refer to the previous application by identifying the application file number and indicating the disposition of the prior application.

### **General Certification Statements**

#### **Certification Statements for GMRS Applicants/Licensees**

#### **Certification Statements for Ship Applicants/Licensees (Including Ship Exemptions)**

### **Signature**

Items 29-31 These items must be completed. To be acceptable for filing, applications and amendments must be signed in accordance with Part 1 of the FCC rules. The signor must be a person authorized to sign the application. **Paper originals of applications must bear an original signature**, neither rubber-stamped nor photocopied signatures are acceptable. Any application lacking an original signature may be dismissed for non-compliance with FCC rules. Be sure all necessary attachments are included with the application.

The typed name of the person authorized to sign the application constitutes the legal signature for an electronically filed application.



**FCC 605  
Main Form**

**Quick-Form Application for Authorization in the Ship, Aircraft,  
Amateur, Restricted and Commercial Operator,  
and General Mobile Radio Services**

Approved by OMB  
3060 - 0850  
See instructions for  
public burden estimate

1) Radio Service Code:

**Application Purpose** (Select only one) ( )

2) <b>NE</b> – New <b>MD</b> – Modification <b>AM</b> – Amendment	<b>RO</b> – Renewal Only <b>RM</b> – Renewal / Modification <b>CA</b> – Cancellation of License	<b>WD</b> – Withdrawal of Application <b>DU</b> – Duplicate License <b>AU</b> – Administrative Update
3) Does this filing request STA (Special Temporary Authorization)? If 'Y', attach the required exhibit as described in the instructions.		( ) <u>Yes</u> <u>No</u>
4) If this request is for an Amendment or Withdrawal of Application, enter the file number of the pending application currently on file with the FCC.		File Number
5) If this request is for a Modification, Renewal Only, Renewal / Modification, Cancellation of License, Duplicate License, or Administrative Update, enter the call sign (serial number for Commercial Operator) of the existing FCC license. If this is a request for consolidation of DO & DM Operator Licenses, enter serial number of DO. Also, if filing for a ship exemption, you must provide call sign.		Call Sign/Serial #
6) If this request is for a New, Amendment, Renewal Only, or Renewal Modification, enter the requested expiration date of the authorization (this item is optional).		MM DD
7) Does this filing request a Waiver of the Commission's Rules? If 'Y', attach the required showing as described in the instructions.		( ) <u>Yes</u> <u>No</u>
8) Are attachments (other than associated schedules) being filed with this application?		( ) <u>Yes</u> <u>No</u>

**Applicant/Licensee Information**

9) FCC Registration Number (FRN):			
10) Applicant/Licensee legal entity type: (Select One) · Individual      · Corporation      · Unincorporated Association      · Trust      · Government Entity · Consortium      · General Partnership      · Limited Liability Company      · Limited Liability Partnership · Limited Partnership      · Other (Description of Legal Entity) _____			
11) First Name (if individual):	MI:	Last Name:	Suffix:
12) Entity Name (if other than individual):			
13) If the Licensee name is being updated, is the update a result from the sale (or transfer of control) of the license(s) to another party and for which proper Commission approval has not been received or proper notification not provided? ( ) <u>Yes</u> <u>No</u>			
14) Attention To:			
15) P.O. Box:	And/Or	16) Street Address:	
17) City:	18) State:	19) Zip Code/Postal Code:	20) Country:
21) Telephone Number:		22) FAX Number:	
23) E-Mail Address:			

**Ship Applicants/Licenses Only**

24) Enter new name of vessel: \_\_\_\_\_

**Aircraft Applicants/Licensees Only**

25) Enter the new FAA Registration Number (the N-number): \_\_\_\_\_

**NOTE:** Do not enter the leading "N".

**Fee Status**

26) Is the Applicant/Licensee exempt from FCC application fees? ( ) Yes No

27) Is the Applicant/Licensee exempt from FCC regulatory fees? ( ) Yes No

**Basic Qualifications**

28) Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a felony by any state or federal court? ( ) Yes No

*If the answer is 'Y', attach an exhibit explaining the circumstances.*

**General Certification Statements**

- 1) The Applicant/Licensee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 2) The Applicant/Licensee certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 3) Neither the Applicant/Licensee nor any member thereof is a foreign government or a representative thereof.
- 4) The Applicant/Licensee certifies that neither the Applicant/Licensee nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. **This certification does not apply to applications filed in services exempted under Section 1.2002(c) of the rules, 47 CFR § 1.2002(c).** See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 5) Amateur or GMRS Applicant/Licensee certifies that the construction of the station would NOT be an action which is likely to have a significant environmental effect (see the Commission's Rules 47 CFR Sections 1.1301-1.1319 and Section 97.13(a) rules (available at web site <http://wireless.fcc.gov/rules.html>).
- 6) Amateur Applicant/Licensee certifies that they have READ and WILL COMPLY WITH Section 97.13(c) of the Commission's Rules (available at web site <http://wireless.fcc.gov/rules.html>) regarding RADIOFREQUENCY (RF) RADIATION SAFETY and the amateur service section of OST/OET Bulletin Number 65 (available at web site <http://www.fcc.gov/oet/info/documents/bulletins/>).

**Certification Statements for GMRS Applicants/Licensees**

- 1) Applicant/Licensee certifies that he or she is claiming eligibility under Rule Section 95.5 of the Commission's Rules.
- 2) Applicant/Licensee certifies that he or she is at least 18 years of age.
- 3) Applicant/Licensee certifies that he or she will comply with the requirement that use of frequencies 462.650, 467.650, 462.700 and 467.700 MHz is not permitted near the Canadian border North of Line A and East of Line C. These frequencies are used throughout Canada and harmful interference is anticipated.
- 4) Non-Individual Applicants/Licensees certify that they have NOT changed frequency or channel pairs, type of emission, antenna height, location of fixed transmitters, number of mobile units, area of mobile operation, or increase in power.

**Certification Statements for Ship Applicants/Licensees (Including Ship Exemptions)**

- 1) Applicant/Licensee certifies that they are the owner or operator of the vessel, a subsidiary communications corporation of the owner or operator of the vessel, a state or local government subdivision, or an agency of the US Government subject to Section 301 of the Communications Act.
- 2) This application is filed with the understanding that any action by the Commission thereon shall be limited to the voyage(s) described herein, and that apart from the provisions of the specific law from which the Applicant/Licensee requests an exemption, the vessel is in full compliance with all applicable statutes, international agreements and regulations.

**Signature**

29) Typed or Printed Name of Party Authorized to Sign

First Name:	MI:	Last Name:	Suffix:
30) Title:			
Signature:			31) Date:
<b>Failure to Sign This Application May Result in Dismissal Of The Application And Forfeiture Of Any Fees Paid</b>			
WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, Section 1001) AND / OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312(a)(1)), AND / OR FORFEITURE (U.S. Code, Title 47, Section 503).			

Information and Instructions

Instructions for Schedule for Additional Data  
for the Ship Radio Service (Part 80)

Form FCC 605, Schedule B, is a supplementary schedule for use with the FCC Quick-Form Application for Authorization in the Ship, Aircraft, Amateur, Restricted and Commercial Operator, and the General Mobile Radio Services, FCC 605 Main Form. This schedule is used to supply information for Ship Radio Service (Part 80). The FCC 605 Main Form must be filed in conjunction with this schedule.

Schedule B  
Instructions

**You must obtain an FCC Ship Radio Station License if you answer 'Y' to any of the following questions. You must answer 'Y' or 'N' to each item.**

Item 1 Enter 'Y' if you are required by law or treaty to carry a radio on your vessel. Otherwise, enter 'N'.

Item 2 Enter 'Y' if your vessel travels to foreign ports. Otherwise, enter 'N'.

Item 3 Enter 'Y' if you have marine radio equipment on board your vessel other than marine VHF radios, EPIRBs (Emergency Position Indicating Radio Beacon), and radar. Otherwise, enter 'N'.

**NOTE:** If you answered 'N' to Item 1, Item 2, and Item 3, you are not required to obtain a license  
- you do not need to file this form with the FCC.

**ADDITIONAL NOTE:** If a ship license is not required, and you choose not to renew, the emergency information used to identify a ship in distress will become inactive and not maintained by the FCC. Correct ship station information is vital for emergency purposes, making it easier to identify and find boats in distress. If you were previously issued a Maritime Mobile Ship Identity (MMSI) by the FCC for a DSC radio, you may update your ship station information with Boat U.S. free of charge using the FCC-issued MMSI unless the FCC-issued MMSI ends in 3 zeros.

(<http://www.boatus.com/mmsi/>).

**Type of License**

Item 4 Enter the appropriate letter for the type of authorization desired.

Enter 'R' if the type of license is regular (transmitter(s) to be used on 1 vessel only).

Enter 'P' if the type of license is portable (a single transmitter will be used on various U.S. registered vessels).

Enter 'F' if the type of license is fleet (several vessels will each have transmitters that operate in similar frequency bands and are to be licensed under one authorization). If the type of license is a fleet, also enter the number of ships in the fleet.

**Class of Ship**

Item 5

General Class of Ship - Enter the appropriate two letter code from the following list that describes the general class of ship:

MM.....Merchant  
PL.....Pleasure  
SV.....Rescue  
FV.....Fishing  
GV.....Official Service Ship

Specific Class of Ship - Enter the appropriate two or three letter code from the following list that describes the specific class of ship:

ACV.....	Air-cushion vehicle
AUX.....	Auxiliary Ship
CHA.....	Barge
BLK.....	Bulk Carrier
CBL.....	Cable Ship
PMX.....	Cargo and Passenger
CA.....	Cargo Ship
CAB.....	Coaster
CON.....	Container Ship
BTA.....	Factory Ship
FBT.....	Ferry
PH.....	Fishing Vessel
VDT.....	Hydrofoil
MTB.....	Motorboat
OIL.....	Oil Tanker
TPO.....	Ore Carrier
PA.....	Passenger Ship
PLT.....	Pilot Tender
FRG.....	Reefer
EXP.....	Research or Survey Ship
VLR.....	Sailing Ship
RAM.....	Salvage Ship
SLO.....	Sloop
RAV.....	Supply Vessel
CIT.....	Tanker
ECO.....	Training Ship
TRA.....	Tramp
CHR.....	Trawler
TUG.....	Tug
BLN.....	Whaler
YAT.....	Yacht

#### **Other Required Information**

Item 6 If applying for a new ship station authorization and the ship already has been assigned a four (4) letter call sign (e.g., WXYZ) by the FCC, enter it here.

Item 7 Enter the name of the ship, if it has one. If it does not, it is suggested that you name your ship for identification purposes and your own safety.

Item 8 Enter the official Coast Guard Documentation Number (as it appears on the document, e.g., 250012) or the State Registration Number (as it appears on the registration, e.g., FL2011GG) of the ship. Do not provide a foreign registration number since the FCC does not license foreign registered vessels.

Item 9 Enter 'Y' if the ship will make international voyages. Otherwise, enter 'N'.

**NOTE:** Applications for a fleet station license, the vessels do not engage in voyages to any foreign country.  
See 47 CFR § 80.55.

Item 10 Enter 'Y' if the ship will communicate with foreign coast stations. Otherwise, enter 'N'.

#### **Radiotelegraph, Narrow-band Direct-printing (NB-DP)/SITOR, and Digital Selective Calling Equipment Information**

Items 11-13 Complete only if you have Radiotelegraph, Narrow-band Direct-printing (NB-DP)/SITOR, or Digital Selective Calling Equipment on board the vessel. Check each box that applies and provide the additional information as needed.

If you have been issued an MMSI number by COMSAT/Lockheed Martin or Stratos, enter in Item 13.

**Note:** If you have been issued an MMSI number by BoatUS, Maritel or SeaTow, these MMSI numbers are for vessels that do not require an FCC license. DO NOT enter the MMSI number in Item 13. A new MMSI number will be issued by the Federal Communications Commission.

## **Ship Radio Requirement Categories and Information**

Items 14-15 Complete only if the vessel is required by law or treaty to carry radio equipment. Enter 'Y' or 'N' for each requirement in item 14. Enter the gross tonnage of the ship in item 15. If the ship is not documented or if the gross tonnage is not known, enter the ship's length in meters in item 15.

(A) RADIOTELEGRAPH STATION REQUIRED BY TITLE III, PART II OF THE COMMUNICATIONS ACT is required on:

- 1) Cargo vessels 1600 and upward gross tons;
- 2) Vessels carrying more than 12 passengers, when leaving or attempting to leave U.S. harbor or port for a voyage in the open sea.

**Note:** A vessel determined by the United States Coast Guard to have the equipment required to implement the Global Maritime Distress and Safety System installed and operating in good working condition is not required to be equipped with a radiotelegraph station.

(B) RADIOTELEPHONE STATION REQUIRED BY TITLE III, PART II OF THE COMMUNICATIONS ACT OR SAFETY CONVENTION is required on cargo vessels 300 to 1600 gross tons.

**Note:** Passenger vessels and cargo vessels over 300 gross tons listed in category (A) and (B) are also subject to the Safety Convention when navigated on international voyages, except on the Great Lakes.

(C) RADIOTELEPHONE STATION REQUIRED BY TITLE III, PART III OF THE COMMUNICATIONS ACT applies to any vessel transporting MORE THAN SIX PASSENGERS FOR HIRE, to be navigated in the open sea or any tidewater adjacent or contiguous to the open sea. This DOES NOT apply to vessels on the Great Lakes or to vessels subject to Title III, Part II.

(D) RADIOTELEPHONE STATION REQUIRED BY GREAT LAKES RADIO AGREEMENT:

- 1) Every vessel 20 meters or over;
- 2) Every vessel engaged in towing another vessel or floating object, except:
  - a) Where the maximum length of the towing vessel, measured from end to end over the deck exclusive of sheer, is less than 8 meters and the length or breadth of the tow, exclusive of the towing line, is less than 20 meters;
  - b) Where the vessel towed complies with subpart 80.951(b); or
  - c) Where the towing vessel and tow are located within a booming ground (an area in which logs are confined).
- 3) Any vessel carrying more than six passengers for hire.

(E) RADIOTELEPHONE STATION REQUIRED BY THE VESSEL BRIDGE-TO-BRIDGE RADIOTELEPHONE ACT applies to the following:

- 1) Every power driven vessel of 20 meters or more in length;
- 2) Every vessel 100 gross tons and upwards carrying one or more passengers for hire;
- 3) Every towing vessel 7.8 meters or over;
- 4) Dredges or floating plants engaged in operations near a channel or fairway. An unmanned or intermittently manned floating plant under the control of a dredge shall not be required to have a separate radiotelephone capability.

## **SEARCH AND RESCUE INFORMATION**

Items 16 & 16a Complete name, address, telephone number, fax number and e-mail address of emergency contact person ashore and alternative emergency contact person ashore. This information will not be made available for public inspection.

Item 17 Enter 406 MHz EPIRB identification code (15 digit number provided by EPIRB manufacturer).

Item 18 Chose the radio installation(s) for the ship and survival craft.

Item 19 Provide the exact quantity of each type of survival craft, raft and/or lifeboat. (A range is not acceptable)

Item 20 Enter the capacity of persons on board including passengers and crew.



**FCC 605**  
**Schedule B**

**Schedule for Additional Data for the**  
**Ship Radio Service (Part 80)**

Approved by OMB

3060 - 0850

See 605 Main Form Instructions  
for public burden estimate

**You must obtain an FCC Ship Radio Station License if you answer 'Y' to any of the following items and each item must be completed with a 'Y' or 'N' response:**

- |  |                            |
|--|----------------------------|
| 1) Are you required by law or treaty to carry a radio on your vessel?  | (   ) <u>Yes</u> <u>No</u> |
| 2) Does your vessel travel to foreign ports?   | (   ) <u>Yes</u> <u>No</u> |
| 3) Do you have marine radio equipment on board your vessel other than marine VHF radios, EPIRBs (Emergency Position Indicating Radio Beacon), and radar? | (   ) <u>Yes</u> <u>No</u> |

**If you answered 'Y' to any of these questions, you must obtain an FCC Ship Radio Station License, continue to complete the form. If you answered 'N' to all of these questions, you do not need to file this form with the FCC.**

4) Type of License: (   ) **Regular** **Portable** **Fleet** If Fleet, give number of ships in fleet: \_\_\_\_\_

5) Class of Ship: (enter one code for each) General Class of Ship: \_\_\_\_\_ Specific Class of Ship: \_\_\_\_\_

6) If application is for a new authorization and the ship already has a four letter call sign, enter it here: \_\_\_\_\_

**Other Required Information**

7) Name of ship: \_\_\_\_\_

8) Official Number of ship (Coast Guard Documentation No. or State Registration No.): \_\_\_\_\_

9) Will ship make international voyages? (Fleet Station applications must select 'N', see 47 CFR § 80.55.) (   ) Yes No

10) Will ship communicate with foreign coast stations? (   ) Yes No

**Complete items 11-13 only if you have Radiotelegraph, Narrow-band Direct-printing (NB-DP)/SITOR, or Digital Selective Calling Equipment. Check each box that applies and provide information as needed.**

11) I have Radiotelegraph (2000-27500 KHz) on my vessel and the FCC has not yet assigned a Morse working series to my vessel.	
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12) I have Digital Selective Calling (DSC) equipment and/or Radiotelegraph NB-DP and need a new 9 digit Maritime Mobile Service Identity (MMSI). <b>Do not</b> check this box if you already have been assigned a 9 digit MMSI by the FCC or received a 9 digit MMSI by commissioning an INMARSAT B, C, or M terminal through COMSAT/Lockheed Martin.	
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**Note:** The single MMSI assigned by the FCC or issued by COMSAT/Lockheed Martin or Stratos should be used with all DSC radio equipment and INMARSAT B, C, or M terminals on board your vessel.

13) If already assigned, my MMSI Number is: _____	
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**Complete items 14 and 15 only if vessel is required by law or treaty to carry radio equipment.**

**14) Ship Radio Requirement Categories**

(A) RADIOTELEGRAPH STATION REQUIRED BY TITLE III, PART II OF THE COMMUNICATIONS ACT	(   ) <u>Yes</u> <u>No</u>
(B) RADIOTELEPHONE STATION REQUIRED BY TITLE III, PART II OF THE COMMUNICATIONS ACT OR SAFETY CONVENTION	(   ) <u>Yes</u> <u>No</u>
(C) RADIOTELEPHONE STATION REQUIRED BY TITLE III, PART III OF THE COMMUNICATIONS ACT	(   ) <u>Yes</u> <u>No</u>
(D) RADIOTELEPHONE STATION REQUIRED BY GREAT LAKES RADIO AGREEMENT	(   ) <u>Yes</u> <u>No</u>
(E) RADIOTELEPHONE STATION REQUIRED BY THE VESSEL BRIDGE-TO-BRIDGE RADIOTELEPHONE ACT	(   ) <u>Yes</u> <u>No</u>

**15) Ship Information**

Gross Tonnage:	Length (in meters):
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**SEARCH & RESCUE INFORMATION****16) EMERGENCY CONTACT PERSON ASHORE**

First Name (if individual):	MI:	Last Name:	Suffix:
Street Address:			
City:	State:	Zip Code:	Country:
Telephone Number: (     )		FAX Number: (     )	
E-Mail Address:			

**16a) ALTERNATIVE EMERGENCY CONTACT PERSON ASHORE**

First Name (if individual):	MI:	Last Name:	Suffix:
Street Address:			
City:	State:	Zip Code:	Country:
Telephone Number: (     )		FAX Number: (     )	
E-Mail Address:			

17) 406 MHz EPIRB Identification Code: \_\_\_\_\_  
(15 digit number provided by EPIRB manufacturer)

**18) Radio Installation(s) for Ship and Survival Craft:**

- |                                     |  |  |
|-------------------------------------|--|--|
| <input type="checkbox"/> INMARSAT A | <input type="checkbox"/> INMARSAT MINI M | <input type="checkbox"/> DSC             |
| <input type="checkbox"/> INMARSAT B | <input type="checkbox"/> VHF             | <input type="checkbox"/> 406 MHz EPIRB   |
| <input type="checkbox"/> INMARSAT C | <input type="checkbox"/> MF              | <input type="checkbox"/> 121.5 MHz EPIRB |
| <input type="checkbox"/> INMARSAT M | <input type="checkbox"/> HF              | <input type="checkbox"/> SART            |

19) Quantity of Survival Craft(s):      Quantity of RAFT(S): \_\_\_\_\_ Quantity of LIFEBOAT(S): \_\_\_\_\_

20) Capacity of Persons on Board (including passengers and crew): \_\_\_\_\_