

NATIONAL LICENSE

12591 Bromton Rd, CARMEL, IN 46033
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EMAIL: pkhoury@nationallicense.com

APPLICANT (COMPANY, ORGANIZATION OR INDIVIDUAL)

EMAIL ADDRESS: _____

APPLICANT/LICENSEE IS A(N) - PLEASE CIRCLE ONE:

INDIVIDUAL	CORPORATION	GOVERNMENTAL ENTITY
UNINCORPORATED ASSOCIATION	TRUST	JOINT VENTURE
LIMITED LIABILITY CORPORATION	PARTNERSHIP	CONSORTIUM

TELEPHONE NUMBER

FAX NUMBER

FEDERAL TAX IDENTIFICATION NUMBER IS REQUIRED BY FCC FOR ALL APPLICANTS
(OR SOCIAL SECURITY NUMBER, IF INDIVIDUAL)

PLEASE CHECK PURPOSE:

_____ NEW LICENSE	_____ LICENSE MODIFICATION
_____ RENEWAL	_____ CONSTRUCTION COVERAGE RESPONSE

CORES/FRN: _____

PASSWORD: _____

CALL SIGN: _____

THE ABOVE NAMED ORGANIZATION/INDIVIDUAL GIVES NATIONAL LICENSE CORPORATION THE AUTHORITY TO SUBMIT AN ELECTRONIC UNSIGNED APPLICATION FOR FREQUENCY COORDINATION/RENEWAL/CONSTRUCTION ON OUR/MY BEHALF.

SIGNED:

AUTHORIZED SIGNATURE

TYPED OR PRINTED NAME

TITLE

DATE