

REQUEST FOR INVESTIGATION OF INTERFERENCE TO RADIOCOMMUNICATIONS

(Apparatus License)
Form INT01

Instructions for completion

- Before seeking assistance from the Office of the Regulator, ensure that your system is operating according to the licence conditions, the interference is intolerable and not within your control.
- The Office of the Regulator assesses your request based on the information on this form, please make every effort to complete all appropriate fields.
- Inclusion of a spectrum design or an audio file of the interference will assist the investigation.

Where to send this form

• Fax: (685) 30281

[Amateur]

• Email: spectech@regulator.gov.ws

Fees

A non-refundable fee may be charged to investigate interference to radiocommunications.

This form is available at www.regulator.gov.ws

lame	Contact Details	
	[Phone]	
Position (tick appropriate)	[Fax]	
Licensee		
Service agent	[Email]	
Business Name & Address	Service Agent Details	
	[Name]	
	[Company]	
	[Phone]	
	[Phone] [Email]	
Affected Radiocommunications Servi	[Email]	
Affected Radiocommunications Servi Apparatus License Details	[Email]	
	[Email]	
Apparatus License Details	[Email] Ce Details Service details in normal operating conditions	
Apparatus License Details [Licence number]	[Email] Service details in normal operating conditions [Measured signal level]	
Apparatus License Details [Licence number]	[Email] Service details in normal operating conditions [Measured signal level] [Type of modulation]	

[Recreational]

[Business/Commercial]		[Other]	
Brief description of your antenna system (type/	/gain/filter	s etc)	
Interference Details			
Nature of interference		Measured or Observed Parameters of Interference	
[Date first noticed		Measured level	
Duration		Polarisation	
Repetition		Bandwidth	
Location		Frequency	
Peak period		Other	
Brief description of recovered audio if interfere	nce is aud	dible	
Brief description of method that was used to m	easure or	observe the interference	
Ener description of method that was ased to m		OBSERVE ARE INTERFERENCE	
Suspected (or identified) interference source			
Other relevant information			
		_	
Date & Signature			
[Date]		[Signature]	