



## TYPE APPROVAL APPLICATION FORM

Form APP01

### Instructions for completion

- Print clearly, unclear or incomplete application forms may delay processing of your license.
- Applicant's details will be treated as confidential.
- Note that the Office of the Regulator will not issue a licence unless all relevant fees are paid.

### Disclosure of Personal Information

Information provided by the applicant or authorised representative in all fields of this form is required. Submitting this form without all information required will delay the process. The Regulator's office may ask for the application to be resubmitted if it does not contain all of the required information.

### Where to send this Form

The Regulator  
Office of the Regulator  
Private Bag  
Apia, Samoa  
Telephone: (685) 30282  
Facsimile: (685) 30281  
Email : [spectech@regulator.gov.ws](mailto:spectech@regulator.gov.ws)

### Details

#### Name

#### Contact Details

[Name]	[Phone]
Position (tick appropriate) <input type="checkbox"/> Licensee <input type="checkbox"/> Service agent	[Fax] [Email]

#### Business Name & Address

#### Service Agent Details

	[Name]
	[Company]
	[Phone]
	[Email]

### Equipment Details

[Manufacture Name]. _____
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[Product Details] .....
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