

# 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 : <u>spectech@regulator.gov.ws</u>

#### Details

N	lame	Contact Details				
	[Name]	[Phone]				
	Position (tick appropriate)	[Fax]				
	☐ Service agent	[Email]				

#### **Business Name & Address**

Service Agent Details

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

### **Equipment Details**

[Manufacture Name].

[Product Details]

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**Declaration of Conformity Certificate** 

[Declaration of Conformity Certificate]	[Test Certificate]								
Date of Application//									
Research Result.									
Approve by.									
Approval No									
Date//									

## Applicant's Declaration

I declare that the information in this application and in any accompanying documents provided by me as a person authorised by the applicant is true and correct in all details, and that the equipment to be employed is of a type approved by the regulator for this purpose.

[Signature]				
[Print Name]				
[Date]	1	I		
[Position Held]				
[Organisation]				