

APPENDIX-2

APPLICATION FORM: LANDING RIGHTS PERMISSION/ AUTHORIZATION  
FOR SATELLITE TELEVISION CHANNEL BY THE LICENSEE

INFORMATION OF LICENSEE

1. License No:
2. Type of the License:
3. Issuing Authority/ Entity:
4. Validity of the License:
5. Official Address:

SATELLIE TELEVISION CHANNEL

6. Name of the Channel
7. Country of Registration:
8. License / Registration No.:
9. Agreement : Please attach the agreement with the Television Channel
10. Contact Details:

PARTICULARS OF THE SATELLITE

11. Name of the Satellite
12. Country of Registration:
13. Agreement : Please attach the agreement with the Satellite Operator
14. Contact Details:

PARTICULARS OF THE EARTH STATION

15. Name of the Earth Station:
16. Location of the Earth Station :
17. Contact Details:

UPLINK/DOWNLINK ARRANGEMENT

A2: 1

  
Lt Col Mohammod Faisal  
psc, Signals  
Director  
Spectrum Management Directorate  
Bangladesh Telecommunication  
Regulatory Commission

18. Uplink/Downlink

- Through the Ground Segment Facilities of BCSCCL /Through own arrangement
- Through other permitted Satellites

19. Name of the Earth Station:

20. Location of the Earth Station :

21. Contact Details:

**TECHNICAL INFORMATION**

22. Please provide the details of the Satellite in the table below

Name of the Satellite and Transponder	Please check the appropriate boxes			
	<input type="checkbox"/> Encrypted <input type="checkbox"/> Unencrypted <input type="checkbox"/> Compressed	<input type="checkbox"/> Analogue <input type="checkbox"/> Digital	<input type="checkbox"/> C-Band <input type="checkbox"/> Ku-Band <input type="checkbox"/> Ka-Band <input type="checkbox"/> Others(.....)	<input type="checkbox"/> Free-to-Air <input type="checkbox"/> Subscription
Uplink Frequency: BW:	Downlink Frequency: BW:		Coverage Map along with EIRP: (Please provide as attachment)	
Transponder:	Symbol Rate:		Orbital Location:	
Polarization:			Modulation:	
Encryption System (if any):			Coordinated with Bangladesh (Yes/No):	
Please attach the technical brochure of the satellite and Co-ordination documents				

Signature of the authorised representative on behalf of the Applicant Company

Date:

A2: 2

  
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