

**DEPARTMENT OF TELECOMMUNICATIONS  
TELECOMMUNICATION ENGINEERING CENTRE  
NEW DELHI/BANGALORE/MUMBAI/KOLKATTA**

**FORM A.1**

**APPLICATION FOR SERVICE APPROVAL**

1. Name of the Service Provider \_\_\_\_\_
2. Licensee Address \_\_\_\_\_  
(as mentioned in  
license agreement \_\_\_\_\_  
  
Telephone No. \_\_\_\_\_ FAX No. \_\_\_\_\_  
  
Operation HQ Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
  
Telephone Nos. \_\_\_\_\_ FAX No. \_\_\_\_\_
3. Company Registration No. \_\_\_\_\_  
and Date \_\_\_\_\_
4. Service Particular \_\_\_\_\_
  - (i) Type of Service
  - (ii) Service Requirements (SR) No.
  - (iii) Coverage area
5. License Agreement No. \_\_\_\_\_  
(copy to be attached)
6. Model/Software Version No. of the equipment  
used in the service including the Terminal used  
for provision of service to customer.
7. Interface approval of the products, if any :
8. Status of SACFA clearance, If applicable \_\_\_\_\_
9. The application for this Service is submitted
  - i. Firm YES/NO
  - ii. Resubmission /Augmentation to network
  - iii. Earlier Ref. : \_\_\_\_\_
  - iv. Modification Attached YES/NO/NIL  
(In case of resubmission/augmentation)

10. All documents required by TEC submitted. YES/NO

11. Declaration:

I (Name) \_\_\_\_\_ Designation \_\_\_\_\_

Certify that above stated information is correct, complete and truly stated.

Dated : \_\_\_\_\_

Place : \_\_\_\_\_

Signature of  
Applicant.

\_\_\_\_\_

To be filled by TEC Office

Received application form.

**OFFICE STAMP**

TEC ACK. No. \_\_\_\_\_

Signature of receiving officer \_\_\_\_\_

Name : \_\_\_\_\_

Date : \_\_\_\_\_

**DEPARTMENT OF TELECOMMUNICATIONS  
TELECOMMUNICATION ENGINEERING CENTRE  
NEW DELHI/BANGALORE/MUMBAI /KOLKATTA**

[To be submitted in duplicate along with the products]

**TEC ACK No & Date:**

1. Applicant's Name:
2. Any status change in Form A YES/NO  
-(If YES, attach details-item wise)
3. Samples submitted for test:  
  
Samples requested: Samples supplied :
4. Confirm all samples are complete &  
and can be tested independently: YES/NO
5. Product Model and Serial No.:  
(Software Version No. also if applicable)
6. Production Plan (PMP) of product if applicable:
7. Fee Remittance details:  
  
Payment Mode:(Cheque/Demand Draft) NO. \_\_\_\_\_  
Dated:  
  
Banker's name:  
  
Amount: Signature  
of the applicant

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**To be filled in by TEC**

TEC Registration No:  
  
Signature of  
receiving officer: \_\_\_\_\_  
  
Name & designation:  
Date:

**OFFICE**

**AFFIDAVIT (Stamp paper of Rupees One Hundred only)**

1. I.....son/daughter of .....resident of .....do solemnly declare and affirm as follows.
2. That I am the owner/Partner of the service provider operating in the name and style as .....having its headquarter as .....
3. That M/s ..... , whom I represent has been issued license for providing services in the circle.....by Department Of Telecommunication vide the license No.....Dated.....
4. That M/s ....., whom I represent has carried out the testing as stipulated by TEC order issued from time to time as per TEC TSTP No. TSTP/UASL-COV01/02.JUN.2006 & TSTP/UASL-SER01/02.JUN.2006 Dated 28.06.2006 (CDMA) / TSTP No.CMTS/SERVICE-01/01.MAR 2000 & CMTS/COV-01/02.JUL 2006 dated 19.07.2006 (GSM) & there is no alteration/manipulation in the test results/drive plots/call detailed record(CDR) and submitted the same as per actual.
5. That M/s ....., whom I represent agree to re-testing of the network by TEC, if felt necessary. TEC shall have the full right to repeat the tests as per the TSTP.
6. That we affirm and declare that we shall be responsible for any dispute arising out of the testing of service cases as mentioned above and shall bear the cost of any litigation and loss/damage caused to DOT.
7. That we indemnify the Department Of Telecommunication and the Telecommunication Engineering Centre against any adverse effect/deterioration of the tested/approved sites for radio coverage/performance parameters.

DEPONENT

Witness1/2