

**FORM: CCK/F/LCS/AF 5**



**APPLICATION  
FOR A  
LICENCE  
TO  
INSTALL AND OPERATE  
PRIVATE VSAT  
EARTH TERMINALS**

**(June 2011 version)**

**NOT FOR SALE**

## 1. MANDATORY REQUIREMENTS FOR AN APPLICANT

- A:** This application should be completed in English
- B:** the application should be addressed to the Director/Licensing, Compliance and Standards (see *address below*) with a covering letter summarising the profile of the applicant and the licence applied for,
- C:** the application should be accompanied by a sworn affidavit submitting the documents listed therein in line with the template at Annex 1 below,
- D:** the table below shows fees payable for the various licences:

<i>(fees are non-refundable)</i>	<b>Application Fee</b> <i>(payable when submitting application form AF 5)</i>	<b>Initial Licence</b> <i>(payable after approval and before issuance of licence)</i>		<b>Annual Operating Fees</b> <i>(payable on/or before 1<sup>st</sup> July of each year)</i>	
		<b>Earth Terminal Fees</b>	<b>Frequency Utilisation Fees</b>	<b>Earth Terminal Fees</b>	<b>Frequency Utilisation Fees</b>
Fee per VSAT Terminal supported by hubs hosted outside Kenya <b>[turnaround time 135 days]</b>	1,000/=	200,000/=	depending on bandwidth and power emitted <i>(see website: <a href="http://www.cck.go.ke">www.cck.go.ke</a> for more details)</i>	200,000/=	depending on bandwidth and power emitted <i>(see website: <a href="http://www.cck.go.ke">www.cck.go.ke</a> for more details)</i>
Fee per VSAT Terminal supported by a hubs in Kenya <b>[turnaround time 14 days]</b>	1,000/=	6,000/=	N/A	6,000/=	N/A

Payments can be made in Banker's or Company Cheque at the Cashier's office on ground floor. The Cashier's office is open between **0900** and **1200** hours and in the afternoon from **1400** to **1600** hours on weekdays (and closed on public holidays and weekends).

- E:** Diplomatic Missions and Organizations accredited to Kenya may channel their application through the Ministry of Foreign Affairs [*part C: above, is not applicable for such an application*],
- F:** educational Institutions wishing to be considered for licence fees waiver should attach a letter/Certificate of Registration from the Ministry of Education,
- G:** foreign entities not based in Kenya applying for VSAT Licences should notarize all their documents,
- H:** some of the parts in this application form require a technically qualified person to complete. Please request the assistance of your service provider to fill in the required information,
- I:** service providers are required to complete all the technical parts; they are therefore advised to liaise with hub/satellite operator/s to obtain accurate technical information,
- J:** please present a completed application form at our offices on 1<sup>st</sup> Floor, CCK Centre Waiyaki Way, at the Front Desk.

**2. FOR OFFICIAL USE ONLY: APPLICATION ACCEPTANCE SECTION**

NO	APPLICATION REQUIREMENTS	RECEIVING OFFICER	CHECKING OFFICER
1.	Is a covering letter on company letterhead included?		
2.	Does the letter include the Applicant profile?		
3.	Is application full completed?		
4.	Is the application signed, giving Applicant's name and designation?		
<b>Are the following copies provided and certified by at least a Commissioner for Oaths?</b>			
5.	Certificate of Incorporation/Registration Certificates		
6.	VAT Registration Certificate		
7.	Valid Tax Compliance Certificate		
8.	ID/passport copies of Directors		

**The Receiving Officer MUST tick ALL the boxes above before accepting and logging an application.**

**Receiving Officer's Comments:** .....

**Receiving Officer's Name:** .....

**Signature:** ..... **Date:** .....

**The Checking Officer MUST tick ALL the boxes above before recommending the application for further consideration.**

**Checking Officer's Comments:** .....

.....

**Checking Officer's Name:** .....

**Signature:** ..... **Date:** .....

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**3. NAME OF APPLICANT**

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*(in bold capital letters in the order the names appear on Registration Certificate etc)*

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**4. APPLICANT'S CONTACTS IN KENYA**

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**1. Physical Address:**

Town ..... Street/Road .....

LR. No. .... Floor ..... Room .....

Name of Building .....

**2. Postal Address:**

P. O. Box ..... Postal Code .....

Post Office Town .....

**3. Phone and Fax Contact:**

Tel. No. .... Fax. No. ....

Mobile ..... Other Tel. Nos. ....

**4. Email Address:** .....

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**5. INFORMATION ABOUT THE VSAT EARTH STATION**

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5.1. Use of the VSAT station: (Broadcast transmission, data or/and voice communication, etc)

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5.2. In case the VSAT is to be used for a temporary period indicate the period of:

• Entry into service (DD/MMM/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

• Termination of service (DD/MMM/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_

5.3. Actual physical location of the VSAT earth station(s) *(in case of a mobile station, indicate areas it will possibly be use):*

Town ..... Street/Road .....

LR No. .... Floor ..... Room .....

Name of Building .....

*(use separate sheet if necessary)*

5.4. Points to be linked (*in case of point to multi-points, use a separate sheet*)

- Point A (*in Kenya*) .....
- Point B.....

5.5. Indicate regular hours of operation in UTC (Co-ordinate Universal Time) per week/per month/per year/other

.....

5.6. Actual or foreseen date of bringing the frequency assignment into use giving the time if possible.

.....

5.7. On urgent matters regarding frequency interference, quality of transmission or out-of-band or spurious emissions and technical operation matters give contacts of the liaison officer

**1. Full Name:** .....

**2. Postal Address:**  
P. O. Box ..... Postal Code .....

Post Office Town .....

**3. Phone and Fax Contact:**  
Tel. No. .... Fax. No. ....

Mobile No. .... Other Tel. Nos. ....

**4. Email Address:** .....

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**6. CAPACITY OF THE VSAT EARTH STATION**

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SITE NO.	LAND NUMBER THE DISH IS LOCATED (see 5.3 above)	CARRIER FREQUENCY <i>(Give actual spot frequency)</i>		BIT RATE (Kbps)		RF BANDWIDTH (MHz)	
		TRANSMIT	RECEIVE	TRANSMIT	RECEIVE	TRANSMIT	RECEIVE
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

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**7. PHYSICAL PARAMETERS OF THE VSAT EARTH STATION**

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SITE NO.	GEOGRAPHICAL CO-ORDINATES (° " ')		ALTITUDE ABOVE SEA LEVEL (in meters)	ANTENNA SHAPE (circular, square etc) AND SURFACE AREA (m <sup>2</sup> )
	LATITUDE	LONGITUDE		
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

## 8. ANTENNA CHARACTERISTIC (OUTDOOR UNIT)

Site No.	Isotropic or Absolute Gain in the Direction of Maximum Radiation (dBi)	Beam Width between the Half Power Points (° ' ')	Minimum Operating Angle of Elevation <sup>1</sup> (° ' ')	Planned Range of Operating Azimuth Angles <sup>2</sup> (° ' ')	Mean Altitude above Sea Level (m)	Polarization		EIRP (dBW)
						Type of polarization	Direction or Plane of polarization	
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

<sup>1</sup> Give in degrees from the horizontal plane the minimum operating angle of elevation of the antenna in the direction of maximum radiation taking into account possible incline orbit operation associated the space segment.

<sup>2</sup> Give in degrees, clockwise from True North, the planned range of operating azimuth angle for the direction of maximum radiation taking into account possible inclined orbit operation of the associated space segment



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**9. TECHNICAL INFORMATION ABOUT PROPOSED VSAT EARTH STATION**

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**a) Modulation Characteristics**

On separate sheets, provide information on modulation characteristics for each carrier, including at least the following:

- (i) for Broadcast signal, provide frequency deviation for the reference signal, pre-emphasis characteristics and characteristics of video signal multiplexed with sound signal.
- (ii) In case of carrier-shift modulated digital signal, indicate bit rate and the number of phases.
- (iii) In case of amplitude modulated carrier including SSB indicated the nature of modulating signal and the kind of AM used.
- (iv) For all other types of modulation provide information useful for interference study.
- (v) For any type of modulation, indicate characteristics of energy dispersal such as the peak-to-peak frequency deviation (MHz) and/or energy dispersal waveform.

**b) Attach related diagrams (network, site maps, etc)**

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**10. INDOOR UNIT**

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*(State what terminal equipment or customer premise equipment (CPE) may be connected to the network and to what standards they conform)*

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**11. INFORMATION ABOUT THE SERVICE PROVIDER**

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**11.1. Name of Service Provider**

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*(e.g. Telkom Kenya Ltd, British Telecom, etc)*

**11.2. Postal Address:**

P. O. Box ..... Postal Code .....

Post Office Town .....

**11.3. Phone and Fax Contact:**

Tel. No. .... Fax. No. ....

Mobile ..... Other Tel. Nos. ....

**11.4. Email Address:** .....

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**12. INFORMATION ABOUT THE HUB OPERATOR**

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**12.1. Full Name** .....

**12.2. Postal Address:**

P. O. Box ..... Postal Code .....

Post Office Town .....

Zip Code .....

Street Name .....

Country .....

**12.3. Phone and Fax Contact:**

Tel. No. .... Fax. No. ....

Mobile ..... Other Tel. Nos. ....

**12.4. Email Address:** .....

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**13. INFORMATION ABOUT THE SATELLITE**

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13.1. Name of Satellite Operator .....

13.2. Name of the Satellite to be used for the service.....

13.3. Identity of the Satellite.....

13.4. Orbital location. ....

13.5. The beam (footprint) by geographical location (°) .....

13.6. Name of any international party with which the use of the frequency has been co-ordinate.

13.7. Full Name .....

**13.8. Postal Address:**

P. O. Box ..... Postal Code .....

Post Office Town .....

**13.9. Phone and Fax Contact:**

Tel. No. .... Fax. No. ....

Mobile ..... Other Tel. Nos. ....

**13.10. Email Address:** .....

**14. COMPLETED APPLICATION FORMS SHOULD BE RETURNED TO: -**

**Director/ Licensing, Compliance and Standards  
Communications Commission of Kenya  
1<sup>st</sup> Floor, CCK Centre, Waiyaki Way  
P. O. Box 14448  
Nairobi - 00800  
Tel: 254-20- 4242000  
Fax: 254-20- 4242430**

**FOR OFFICIAL USE ONLY**

The applicant **MEETS/ DOES NOT MEET** the Commission's requirements and is hereby **RECOMMENDED/NOT RECOMMENDED** to be licenced as a

.....  
The reasons for not recommending the applicant are as follows:-

.....  
Name.....

Designation..... Signature.....

CLC No..... Date.....

**Official stamp**

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**ANNEX 1: TEMPLATE OF THE AFFIDAVIT TO BE SUBMITTED**

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**REPUBLIC OF KENYA**

**IN THE MATTER OF OATHS AND STATUTORY DECLARATIONS ACT**  
**CHAPTER 15, LAWS OF KENYA**

**AND**

**IN THE MATTER OF AN APPLICATION FOR LICENCE FROM THE**  
**COMMUNICATIONS COMMISSION OF KENYA**

**AFFIDAVIT**

I, \_\_\_\_\_ of Post Office Box  
Number \_\_\_\_\_ (Town) \_\_\_\_\_ (Postcode)  
\_\_\_\_\_ do hereby make oath and state as follows:

1. THAT I am an adult of sound mind and \_\_\_\_\_  
(*position/ status in the applicant entity*) of \_\_\_\_\_  
(*name of the applicant*) and hence competent to swear this Affidavit.
2. THAT I am a citizen of the \_\_\_\_\_ and holder of  
National Identity Card No. (or Passport No.) \_\_\_\_\_ .
3. THAT \_\_\_\_\_ (*name of the applicant*)  
has resolved to make an application to the Commission for the construction and  
operations of private VSAT Eart Station/s licence.
4. THAT I have submitted the following copies of our documents in support of the said  
application:
  - 4.1. Registration and ownership status:
    - 4.1.1. copy of Certificate of Incorporation,
    - 4.1.2. copy of Business Name, or
    - 4.1.3. copy of Registration Certificate etc.
  - 4.2. copies of Kenyan National Identity Cards (ID) or Kenyan/Foreign  
passports for all the Directors of the Applicant:
    - 4.2.1. Both sides of the ID should be copied onto the same side of an A4  
size paper, and
    - 4.2.2. Passport copies should include pages showing the nationality, date of

issue and expiry, name and photograph of holder.

4.3. Compliance with Kenya Revenue Authority rules:

4.3.1. Copy of Personal Identification Number (PIN) card, and

4.3.2. Copy of Valid Tax Compliance Certificate.

4.4. Technical information about the VSAT earth station/s as detailed at part 9 of this forms (see above).

5. THAT I swear that the documents listed in 4 above are authentic copies of the original documents issued by the relevant authorities to the applicant.

6. THAT this Affidavit is sworn in support of \_\_\_\_\_  
(Applicant's name) application for private VSAT Eart Station/s licence.

7. THAT what is deponed to herein above is true and within my own knowledge.

SWORN at \_\_\_\_\_ by the said )

\_\_\_\_\_ )

This \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ )

BEFORE ME )

COMMISSIONER FOR OATHS )

\_\_\_\_\_  
(Deponent)

Drawn by:

\_\_\_\_\_ (law firm)

\_\_\_\_\_ (physical address)

P. O. Box \_\_\_\_\_

\_\_\_\_\_ (town)

\_\_\_\_\_ (postal code)