Please provide the required information below and submit electronically to [licence@ra.bm](mailto:licence@ra.bm).

Application Type:

🞏 NEW LICENCE 🞏 LICENCE RENEWAL

🞏 MODIFICATION TO AN EXISTING LICENCE (Specify the details below):

Applicant Name or Licensee:

Licence Number and/or Call Sign:

(Renewals or modifications only)

Address of Applicant/Licensee:

Applicant Contact Information

Daytime Telephone Number: Mobile Telephone Number: Email Address:

Radio Equipment Details:

Manufacturer Model Serial Number Country Purchased

\*The name of the country will be sufficient if the radio was not purchased in Bermuda. If the radio was purchased in Bermuda, state the name of the vendor.

I certify that the information entered above is correct:

Date Print Name Signature