



ZICTA

ZAMBIA INFORMATION AND COMMUNICATIONS TECHNOLOGY AUTHORITY

Form II
(Regulation 3)
(To be completed in triplicate)

ZAMBIA INFORMATION AND COMMUNICATION TECHNOLOGY AUTHORITY

The Information and Communication Technologies Act, 2009

(Act No. 15 of 2009)

The Information and Communication Technologies

(Electronic Communications)(Licensing) Regulations, 2010

APPLICATION FOR A SERVICE LICENCE (NETWORK LICENCE)

<input type="checkbox"/> Individual or <input type="checkbox"/> class license (Tick as appropriate)		Shaded fields for official use only		License code:	
				Date/Time:	
Information Required		Information Provided			Check List (✓)
1	Type of network				()
2	a) Name(s) of applicant(s)				()
	b) Type of Applicant: (Tick as appropriate)	Individual ()	Company ()	Partnership ()	()
3	a) Nationality				()
	b) Identity card (National Registration Card No. or Passport No.) - Attach certified copies				()
4	a) Notification address Telephone:				()
					()
					()
	b) Information of contact person authorised to represent the applicant Telephone #:				()
					()
					()
5	a) Company name				()

	b) Company address:						
	c) Company registration No. (Attach certified copies of certificate of registration)					()	
	d) Shareholders-	Shareholder	Shares held	Nationality	NRC/Passport No.		
						()	
						()	
						()	
						()	
						()	
						()	
						()	
	e) Directors	Director	Address	Share held	Nationality	NRC/Passport No.	
							()
							()
							()
						()	
Partner		Address	Share held	Nationality	NRC/Passport No.		
						()	
						()	
						()	
						()	
f) Partners						()	
						()	
6	Previously held licenses in Zambia if any, by applicant issued under the Information and Communication Technologies Act, 2009	License (Type and License No.)	Location				
		a)	a)			()	
		b)	b)			()	
		c)	c)			()	
		d)	d)			()	
		e)	e)			()	
7	Currently held licenses in Zambia, if any, by applicant issued under the Information and communication Technologies Act, 2009	License (Type and License No.)	Location				
		a)	a)			()	
		b)	b)			()	
		c)	c)			()	
		d)	d)			()	
		e)	e)			()	
	f)	f)			()		

8	Currently held licenses in Zambia, if any, by subsidiary companies issued under the Information and Communication Technologies Act, 2009	License (Type and License No.)		Location	
		a)		a)	()
		b)		b)	()
		c)		c)	()
		d)		d)	()
		e)		e)	()
		f)		f)	()
9	Have you ever applied for a license in Zambia?				
	If yes please give details below				
	License applied for	Location	Category of business	Date of application:	Status of application (granted, rejected or pending)*
					()
				()	
				()	
10	*If application was rejected give reasons for rejection				
	Project details				
	a) Location	Proposed launch date			()
		District			()
b) Brief description:					
11	Appendices*				
	Appendix No.1	Service portfolio, roll out plan and implementation schedule including service coverage area and intended performance levels		()	
	Appendix No.2	Business plan for proposed services (should include information on technical proposal of the services to be provided, information on previous experience in the provision of the services and the profile of the individual company or partnership, as the case may be)		()	
	Appendix No.3	Proposed tariff structure, including details of all charges (wholesale and retail)		()	
	Appendix No.4	End-user terminal requirements and indicative retail prices (where appropriate)		()	
	Appendix No.5	Investment certificate issued by the Zambia Development Agency, where applicable		()	
	Appendix No. 6	Tax Payers Identification Number (TPIN)		()	
	Appendix No. 7	Information of the contact person authority may require		()	
	Appendix No. 8	Tax Payers Identification Number (TPIN)			

	Appendix No. 9	Any other information which the Authority may require		
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*The information required to be included in the various appendices

QUALITY OF SERVICE UNDERTAKING

I/we declare that the quality of service I/we provide shall meet the minimum requirements set out under the Act or any other law or, guidelines published by the Authority or any international standard to which the license requires adherence.

DECLARATION

I/we declare that all the particulars and information provided in the this application are complete correct and true and I/we agree that in the event that any of the said particulars and information provided is found to be untrue or fraudulent, the license will be revoked. I/we agree that in the event of the revocation of the license, any fee paid to the Authority for a license shall be forfeited. I/we declare that in the event that the nature of my/our business changes, or I/we no longer carry out operations in terms of the license, I/we will notify the Authority in which case my/our license may be revoked or revised. Declared at this .day of 20 by the following persons who are duly authorized to sign for and on behalf of the applicant under the authority of the Power of Attorney or Board Resolution which is hereby by attached.

_____ _____ _____ _____
Applicant's name *Date*

 Applicants Signature

FOR OFFICIAL USE ONLY

Received by: __ _____
Officer

RECEIPT No.

Date Received: __ _____

Amount Received: _ _____ STAMP

Serial No. of application: __ _____