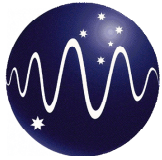


Australian
Communications
Authority

800 MHz Band Spectrum Licence Allocation

APPLICATION FORM

This Application Form has been approved pursuant to section 2.4 of the *Radiocommunications (Spectrum Licence Allocation Open Outcry Auction-800 MHz Band) Determination 2000* (the Determination).



Australian
Communications
Authority

Application Form

Before completing this Form, ensure you understand the conditions under which licences are being allocated. You should understand the provisions contained in:

- the ***Radiocommunications Spectrum Marketing Plan (800 MHz Band) 2000***;
- the ***Radiocommunications (Spectrum Licence Allocation Open Outcry Auction-800 MHz Band) Determination 2000*** (the “Determination”);
- the ***Radiocommunications Act 1992***; and
- the ***Applicant Information Package***.

It is in your interest to seek independent legal, financial and engineering advice before deciding to participate in this auction.

The completed Application Form together with required Deed of Acknowledgment, Deed of Financial Security (if applicable), accompanying Statutory Declaration, one or more Forms of Authority, and payment of the entry fee **MUST** be received at the ACA Auction Centre by no later than **11.00 am Canberra time** on

Thursday 1 February 2001

Late applications and photocopies and facsimiles of completed forms will not be accepted under any circumstances.

Street address

Purple Building
Benjamin Offices
Chan Street
BELCONNEN ACT 2617

Enquiries may be directed to the ACA Auction Centre on:

- telephone (02) 6219 5471
- fax (02) 6219 5122
- email david.brumfield@aca.gov.au

How to complete the Application Form

These instructions are cross-referenced to each section of the Form. Relevant details must be completed before the Form can be accepted. Use of block letters will assist legibility.

- A.** INSERT the FULL NAME(s) of each person who wishes to make an application. For an application in joint names, all names must be shown and each party to the application must sign. An application by a company must be under seal. If the Applicant is not incorporated, the application must be in the name(s) of an individual(s). For example, if the Applicant is an unincorporated entity, at least one individual office bearer must sign this form as the Applicant. In the case of a trust, at least one trustee must sign this form as the Applicant. At least one full name is required for each individual. If two or more persons wish to make a joint application, tick the appropriate box and provide details on an attached sheet of paper. Where the Applicant has a registered office, the address of the registered office should be used.
- INSERT Australian Company Number (ACN) or Australian Registered Business Number (ARBN) as appropriate.
- N.B Information in this question will be provided to other applicants and to the ACCC.**
- B.** INSERT the trading name of the business (if any).
- N.B Information in this question will be provided to other applicants and to the ACCC.**
- C.** TICK the boxes beside those areas which best describe your area of operations.
- N.B Information in this question will be provided to other applicants and to the ACCC.**
- D.** INSERT the details of the person to whom inquiries and correspondence should be directed as well as a second person who can be contacted if your principal contact person is unavailable. All contact details requested should be provided if possible. The ACA needs these details so that, in an emergency, we can make contact with the applicant during the auction.
- N.B Information in this question will NOT be provided to any other person.**
- E.** Indicate the lots you wish to bid on. Each lot in this allocation is 2 x 2.5 MHz.
- F.** The Entry Fee is \$10,000 and will not be waived.
- G.** Nominate whether you are submitting a completed Deed of Financial Security **OR** making a performance payment.
- H.** If you have nominated to make a performance payment at item **G**, enter the amount of the performance payment in item **H**. The amount of performance payment required is the amount of lots nominated at box **E** multiplied by \$1,000,000.
- I.** Total items **F** and **H** and ENTER the result in box **I**. **Your application documents must be accompanied by payment for the amount at Box I. Payment may be by bank cheque or by EFT. Cheques should be made payable to the “Collector of Public Moneys, Australian Communications Authority”**
- J.** SIGN the Form. If signed under a company’s common seal, the signatories attest that the common seal was affixed in accordance with the company’s Articles of Association. Joint Applicants must all sign the form. If there is insufficient space, please sign or execute as appropriate on an attached sheet of paper.
- K.** DATE the form.

Remember you should keep a copy of all completed forms.

A. Full Name and Address of Applicant (*Answers to Question A will be provided to other applicants and the ACCC.*)

ACA Client number (if known)

Organisation Name (for an organisation)

Applicant's Last Name

Given Name(s)

Mr/Mrs/Ms/Dr/(other)

Street Address

Suburb/City/Town

State

Postcode

Country

Company ACN or ARBN (if applicable)

☐

This is a joint application. Details of other applicants are on the attached sheet of paper.

(If this applies, tick the box above and set out the details of any other parties on a separate sheet of paper. The paper should be marked clearly "Question A" and the name of the person applying and whose name appears above)

B. Trading Name (if any) of Applicant

Answers to Question B will be provided to other applicants and the ACCC.

C. Client Type

Answers to Question C will be provided to other applicants and the ACCC.

Tick relevant box

☐ Company

☐ Commonwealth department

☐ Local government

☐ Other Commonwealth agency

☐ Individual

☐ State government

☐ Community/volunteer group

Industry Category

Tick relevant box

☐ Agriculture, forestry and fishing

☐ Electricity, gas, water supply

☐ Transport and storage

☐ General government

☐ Mining

☐ Construction

☐ Communication services

☐ Education

☐ Manufacturing

☐ Wholesale/retail trade

☐ Finance and insurance

☐ Health services

☐ Safety services

☐ Recreational and amateur activities

☐ Other

D. Contact details

Answers to Question E will NOT be provided to other applicants.

Principal contact person

Surname

Given Names

Mr/Mrs/Ms/Dr

Position

Address

Telephone Number

BH

AH

mobile

()

()

()

Facsimile

()

email

Backup contact person

Surname

Given Names

Mr/Mrs/Ms/Dr

Position

Address

Telephone Number

BH

AH

mobile

()

()

()

Facsimile

email

()

E. Nominate the lots that you wish to bid on (tick those that apply)

Regional Australia - 1 ☐

Regional Australia - 2 ☐

Applicants are not bound to bid in the areas and on the bands nominated on this form in the auction.

F. Entry Fee (section 2.1)

\$10,000

G. Select the type of Financial Security being provided (tick only one box in item G)

1. I am submitting a Deed of Financial Security and it is attached. ☐

OR (tick one only)

2. I am submitting a Performance Payment and payment accompanies this application ☐

H. Enter the value of the Performance Payment

\$

A performance payment is only required if a Deed of Financial Security is not submitted. Only enter an amount in this box if you are submitting a performance payment instead of a deed of Financial Security.

I. TOTAL PAYMENT REQUIRED (Items F+H)

\$

Under section 3.1 of the Determination, payment of the entry fee, and, if required, the performance payment, must accompany the application. Payment of the amount at item **I** may be made by Bank Cheque or by bank transfer. Cheques should be made payable to the "Collector of Public Monies, Australian Communications Authority" and crossed "Not Negotiable".

J. Applicant's signature

The details provided in this form and in the attached supplementary sheets are true and correct in every detail.

EXECUTED AS A DEED

Signature(s) of Applicant(s)

If two or more persons are applying jointly, please PROVIDE ALL signatures.

Signed in my presence by the applicant who is personally known to me.

Witness signature

Witness name in block letters

Witness address

OR, if the Applicant is a company:

EXECUTED AS A DEED

Signed, sealed and delivered for and on behalf of the

ACN/ARBN

By authority of the Directors :

(Print name of Director)

(Print name of Director/Secretary)

(Signature of Director)

(Signature of Director/Secretary)

If two or more companies are applying jointly, all the companies must execute in the same form on an attached sheet of paper.

OR, in any other case (eg incorporated association or statutory authority), please execute in the appropriate manner.

K. Date

| | |
|---|-------|
| / | /2001 |
|---|-------|