Communications Authority of Maldives

Male', Republic of Maldives



CL-TOV-E-01

Transceiver Ownership Verification Form

Transceiver Details	
Make : Model Number :	Serial Number :
For submissions of more than one transceiver, their details can be attached in a separate sheet.	
Owner's Information	
Full Name : (Person / Company)	
ID Card No./Company Reg. No. :	
Permanent Address :	
Present Address :	
Tel. No. :	Email Address :
Date :	Signature : Company Stamp
Witness	
We testify that the above mentioned transceiver / transceivers belongs to the person / company mentioned above.	
Witness 1	Witness 2
Signature :	Signature :
ID Card No. : A	ID Card No. : A
Full Name :	Full Name :
Permanent Address :	Permanent Address :
Present Address :	Present Address:
Mobile No. :	Mobile No.:
Date :	Date :

Documents to be submitted with this Form

- A Valid ID Card for Maldivians
- Passport or Work Visa for non Maldivians
- A copy of the Company's Registration Certificate

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