



COMMUNICATIONS COMMISSION OF KIRIBATI

P.O Box 529, Betio Tarawa Phone: 686-25431 email: enquiry@cck.ki

Type Approval Application Form

1. Name and address of Applicant (individual, company, service provider, organization)	
Name	
Physical Address	
Postal Address	
Name of Contact Person	
Website:	Email:
Telephone:	Mobile:

2. Description of Equipment	
Product name	
Manufacturer name and origin	
Model	
Frequency range (if applicable)	
ITU Emission Code(if applicable)	
Modulation(if applicable)	
Power Output	

3. Intended use within Kiribati

4. Documentation to be Enclosed (4.1 -4.5 are not required for equipment that has already been approved)			
4.1	Test report (s) from laboratories accredited by ACMA, CE, FCC, or ITU	4.4	Operating Instructions (Manual/Catalogue)
4.2	Declaration of Conformity/Certificate from the manufacturer	4.5	Description of repair services in Kiribati
4.3	Copy of Labeling/Markings from a Type Approval Authority (i.e. ACMA, CE, FCC or ITU)	4.6	Proof of Payment of the Application Fee -AUD 100 for initial Approval Certificate for the first importer of the equipment -AUD 50 for subsequent Approval Certificate for additional importers

CCK-Official	
Application received date:	Signature:
Decision on application date:	Signature:
Decision sent to applicant date:	Signature: