



Microwave Frequency Coordination Request Page 1 of 3

Please complete this form to fax a microwave frequency coordination request. ***This form has been set up so you can type your information directly on-screen to make it more legible for faxing.*** Just fill it out and print for faxing. We will contact you within one business day to confirm receipt of your request and to obtain additional information, if needed.

ALL FIELDS WITH AN * MUST BE COMPLETED FOR YOUR REQUEST TO BE ACCEPTED.

Administrative Information

Contact Company *

Street *

City, State, ZIP *

Licensee Contact *

Phone *

Fax

E-mail *

Licensee (if different from Contact)

Street

City, State, ZIP

Engineering Contact

Phone

Fax

E-mail

Preferred Comsearch Coordinator's E-mail

Billing Information (select one)

Credit Card Type: Visa MasterCard Discover/Novus American Express

Account Number Expiration Date

Purchase Order #

Other (please explain)

Choose one of the following: I have already received a price quote for this request.
Please send me a price quote before processing this request.



Microwave Frequency Coordination Request

ALL FIELDS WITH AN * MUST BE COMPLETED FOR YOUR REQUEST TO BE ACCEPTED.

Path Information

Band * CC OFS BAS
Coordinate Datum * NAD83 NAD27 Other
Operation Mode * Simplex Duplex
Number of Frequencies Requested *

Site Information

Site 1

Site 2

Site Name *	<input type="text"/>	<input type="text"/>
State *	<input type="text"/>	<input type="text"/>
Call Sign	<input type="text"/>	<input type="text"/>
Latitude *	DDD MM SS.S Dir <input type="text"/> <input type="text"/> <input type="text"/> N	DDD MM SS.S Dir <input type="text"/> <input type="text"/> <input type="text"/> N
Longitude *	<input type="text"/> <input type="text"/> <input type="text"/> W	<input type="text"/> <input type="text"/> <input type="text"/> W
Ground Elevation (AMSL) *	<input type="text"/> m ft	<input type="text"/> m ft
ASR Number *	<input type="text"/>	<input type="text"/>
Structure Height *	<input type="text"/> m ft	<input type="text"/> m ft

Antenna Information

Site 1

Site 2

Manufacturer *	<input type="text"/>	<input type="text"/>
Model *	<input type="text"/>	<input type="text"/>
Centerline *	<input type="text"/> m ft	<input type="text"/> m ft



Microwave Frequency Coordination Request

ALL FIELDS WITH AN * MUST BE COMPLETED FOR YOUR REQUEST TO BE ACCEPTED.

Radio Information

Site 1

Site 2

Manufacturer *	<input type="text"/>	<input type="text"/>
Model *	<input type="text"/>	<input type="text"/>
Emission	<input type="text"/>	<input type="text"/>
Channel Loading	<input type="text"/>	<input type="text"/>
Nominal Power (ATPC only) (dBm)	<input type="text"/>	<input type="text"/>
Coordinated Power (dBm)	<input type="text"/>	<input type="text"/>
Maximum Power (ATPC only) (dBm)	<input type="text"/>	<input type="text"/>

Losses

Site 1

Site 2

Transmit Only (dB)	<input type="text"/>	<input type="text"/>
Receive Only (dB)	<input type="text"/>	<input type="text"/>
Common (dB)	<input type="text"/>	<input type="text"/>

Additional Comments