



Amendments/Additions to Current Ship Portable Radio Licence Details

Please ensure this form is signed and dated at the bottom and use capitals throughout.

All three boxes below must be completed.

Portable MMSI number
(if applicable)

T number

Licensee reference

Tel: 0870 243 4433

Fax: 0117 975 8911

SECTION 1 CHANGES TO RADIO EQUIPMENT

(Please sign and date at the bottom of the page on completion of this section)

Please indicate changes since the licence was last issued:

	Added	Removed
VHF Portable		
Portable VHF DSC		
EPIRB 121.5/243MHz		
EPIRB 406MHz		

	Added	Removed
EPIRB 1.6GHz		
Aeronautical SAR 121.5/123.1MHz		

Additional identification numbers

If you require an additional identification number, please tick the relevant type:

Digital Selective Calling only

SECTION 2 406MHz/1.6GHz EPIRB DETAILS

(Please sign and date at the bottom of the page on completion of this section)

Beacon Frequency

Beacon Manufacturer's name

Beacon Type (from the label on the beacon)

Beacon Serial Number (from the label on the beacon)

Hex Id (15 characters, if known)

24 hour emergency contact.

This information must be supplied and will only be used by Search and Rescue Authorities in an emergency.

Name _____

Address _____

Postcode _____

Tel _____ Fax _____

Relationship _____

SECTION 3 CHANGE IN CURRENT LICENSEE NAME OR ADDRESS

(Please sign and date at the bottom of the page on completion of this section)

N.B. Licences are NOT transferable between persons - obtain an RA385 to apply for a new licence.

Registered address

Address _____

Town _____

County _____ Postcode _____

Tel _____ Fax _____

Title _____ Forename(s) _____

Surname _____

Mailing address

Address _____

Town _____

County _____ Postcode _____

Tel _____ Fax _____

SECTION 4 LICENCE NO LONGER REQUIRED

(Please sign and date at the bottom of the page on completion of this section)

Radio sold Tick below
Radio lost or destroyed

Details of new owner

Name _____

Address _____

Town _____ Postcode _____

SECTION 5 DECLARATION

I declare that all of the details given above are correct to the best of my knowledge and that I will abide by the terms and conditions of the licence.

Signature of applicant/licensee _____

Full name (in block capitals) _____

Dated _____

If you are signing on behalf of a company or other organisation please state:

Name of organisation _____

Your position within the organisation _____

Please return this form to:
Radio Licensing Centre, P.O. Box 1495, Bristol BS99 3QS