

RADIO STATION AUTHORIZATION APPLICATION

Wing: ALABAMA	Region: SOUTHEAST	Call Sign:	Tactical Call: GOLDENROD
Type of Application: _____ New Station _____ Modification _____ Renewal			
Class of Station: _____ Fixed Station _____ Mobile _____ Airmobile			
Type of Station: _____ Voice _____ Digital _____ Voice/Digital			
Airmobile/Landmobile Area of Operation: IN THE STATE OF ALABAMA			
Transmitter Location – Fixed Station: (Street Address or other description of Site)			
City:		State:	Zip Code:
Latitude:		Longitude:	
EQUIPMENT INFORMATION:			
	Manufacturer/Model Number:	Serial Number:	Owner:
4 Mhz HF			
26.617 / 26.620			
Other HF			
VHF – FM			
HF – Digital			
VHF – Digital			
SAR			
Emergency Frequency: _____ Yes _____ No Repeater Access: _____ Yes _____ No Emergency Power: _____ Yes _____ No			
NOTE: If the answer to either of the questions listed below is "NO", do not submit this application.			
Is all equipment capable of meeting CAP/FCC frequency tolerance standards?			_____ Yes _____ No
SAR Station Only: Is the equipment listed above on a current FCC/FAA type accepted/approved list?			_____ Yes _____ No
Antenna Height Above Ground:		Antenna Height Above Mount:	
Antenna Mounted On: _____ Ground _____ Building _____ Other			
Tower Date:	FAA COORDINATION DATA Nearest Airport:	Designation of Nearest Runway:	Distance to Center Line:
Primary Service:	Distance to Airport:	Antenna Height Limit:	MSL Ground Elevation at Antenna Site:
Height of Topmost Antenna:	DIGITAL OPERATIONS	MYCALL:	ALIAS:
Call Sign:	NODE:	MAILBOX:	SELCAL:
Name:	Unit Charter Number:	Rank:	CAP I.D. Number:
Street Address:	City:	State:	Zip Code:
Home Phone:	Work Phone:	Email Address:	
FCC License Type:	FCC License # / I.D. / Date:		
FCC License Endorsements:		CAP ROA # and Wing:	
Applicant Signature:		Date:	Commander/Communications Officer Signature:
			Date:
Wing Use Only: _____ Approved _____ Disapproved _____ Antenna Survey Pending		Approval Date:	Alabama Wing Form 27 Revised January, 2001 Local Reproduction Authorized