NCVEC QUICK-FORM 605 APPLICATION AMATEUR OPERATOR/PRIMARY STATION LICENSE

SECTION 1 - TO BE COMPLETED BY APPLICANT PLEASE PRINT LEG					SE PRINT <u>LEGIBLY!</u>	
PRINT LAST NAME SUFFIX (Jr., Sr.) FIRST NAME		M.I.	STATION CALL SIGN (IF ANY)		
MAILING ADDRESS (Number and Street or P.O. Box)						
				FEDERAL REGISTRATION NUMBER (FRN) - IF NONE, THEN SOCIAL SECURITY NUMBER (SSN)		
CITY STATE CODE ZIP CODE (5 or 9 Numbers)			THEN SOCIAL SECURITY NUMBER (SSN)			
DAYTIME TELEPHONE NUMBER (Include Area Code)	E MAII ADDDESS (MA	NDATORY TO DECEN	/E LICENSE	NOTIFICATION FMAIL FROM FOO		
DAYTIME TELEPHONE NUMBER (Include Area Code) E-MAIL ADDRESS (MANDATORY TO RECEIVE LICENSE NOTIFICATION EMAIL FROM FCC)						
Basic Qualification Question: *ANSWER REQUIRED IN ORDER TO PROCESS YOUR APPLICATION*						
Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a						
felony by any state or federal court?						
If "YES", see "FCC BASIC QUALIFICATION QUESTION INSTRUCTIONS AND PROCEDURES" on the back of this form.						
I HEREBY APPLY FOR (Make an X in the appropriate box(es)): CHANGE my mailing address to above address						
EXAMINATION for a new license grant						
CHANGE				E my station call sign systematically		
				t's Initials: To confirm		
				AL of my license grant		
Former Name: Exp. Date:						
Do you have another license application on file		IER APPLICATION		PENDING FILE NUMBER	(FOR VEC USE ONLY)	
with the FCC which has not been acted upon?						
I certify that:						
 I waive any claim to the use of any particular frequency regardless of prior use by license or otherwise; All statements and attachments are true, complete and correct to the best of my knowledge and belief and are made in good faith; I am not a representative of a foreign government; 						
 I am not subject to a denial of Federal benefits pursuant to Section 5301of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862; The construction of my station will NOT be an action which is likely to have a significant environmental effect (See 47 CFR Sections 1.1301-1.1319 and Section 97.13(a)); 						
 I have read and WILL COMPLY with Section 97.13(c) of the Commission's Rules regarding RADIOFREQUENCY (RF) RADIATION SAFETY and the amateur service section of OST/OET Bulletin Number 65. 						
Signature of Applicant:						
Nate:				Signed:	er er ered ege	
SECTION 2 - TO BE COMPLETED BY ALL ADMINISTERING VES						
Applicant to qualified for operator morries states.			TE OF EXAMINATION SESSION			
NO NEW LICENSE OR UPGRADE WAS EARNED				AMINATION SESSION LOCATION		
TECHNICIAN Element 2						
			VE	VEC ORGANIZATION		
GENERAL Elements 2 and 3			VE	VEC RECEIPT DATE		
AMATEUR EXTRA Elements 2, 3 and 4						
I CERTIFY THAT I HAVE COMPLIED WITH THE ADMINISTERING VE REQUIRMENTS IN PART 97 OF THE						
COMMISSION'S RULES AND WITH THE INSTRUCTIONS PROVIDED BY THE COORDINATING VEC AND THE FCC.						
1st VEs NAME (Print First, MI, Last, Suffix)	LS STATION CALL SIGN	VES SIGNATURE (M	usi maich h	anie)	DATE SIGNED	
2nd VEs NAME (Print First, MI, Last, Suffix)	Es STATION CALL SIGN	VEs SIGNATURE (Must match name		ame)	DATE SIGNED	
3rd VEs NAME (Print First, MI, Last, Suffix) V	Es STATION CALL SIGN	VEs SIGNATURE (Mu	int matel	ama)	DATE SIGNED	

DO NOT SEND THIS FORM TO FCC - THIS IS NOT AN FCC FORM.

IF THIS FORM IS SENT TO FCC, FCC WILL RETURN IT TO YOU WITHOUT ACTION.