

Application for Radio Station License

Tennessee Wing – Civil Air Patrol

Member Name (Last, First, MI)		Rank	CAP ID Number	Unit Charter TN -	Duty Assignment
Address		City	State	ZIP	ACUT Date
Home Phone	Work Phone	Cell Phone	E-Mail Address	ROA Number	Amateur Callsign
<input type="checkbox"/> New Call Sign: TNCAP _____		<input type="checkbox"/> Renew Call Sign: TNCAP _____		<input type="checkbox"/> Change Call Sign: TNCAP _____	
				Exp. Date: _____	
Latitude (North)	Longitude (West)	Complete Address (If different from above)		Station Elevation MSL	Antenna Height AGL (to Tip)
Landlord: (If the antenna is located on Federal land, Answer a & b below).					
a. Provide the Agency/Owner/Unit Name:					
b. Provide the Federal Installation Frequency Manager's name: (If none, then provide the CAP Unit that is responsible for the antenna).					
Nearest Airport Name		Distance to Field	Distance to nearest runway centerline (If on field)		
Name(s) of those involved with coordination:					
CAP is considered a Federal Agency, therefore, ALL radios (Corporate or Member Owned) must be COMPLETELY compliant with NTIA specifications. According to CAP Regulations, ALL radios (Corporate or Member Owned) must be able to suppress the display of Actual Frequencies and only show Designators. NTIA specs. can be checked at: https://ntc.cap.af.mil/					

Frequency / Mode	Station Type	Emergency Power	Antenna Mounting & Type		
<input type="checkbox"/> HF-SSB <input type="checkbox"/> VHF-FM	<input type="checkbox"/> Fixed <input type="checkbox"/> Mobile	<input type="checkbox"/> Battery <input type="checkbox"/> Solar	<input type="checkbox"/> Building	<input type="checkbox"/> Vert	<input type="checkbox"/> Dipole <input type="checkbox"/> Tuner
<input type="checkbox"/> HF-AM <input type="checkbox"/> VHF-AM	<input type="checkbox"/> Aero <input type="checkbox"/> Portable	<input type="checkbox"/> Generator	<input type="checkbox"/> Tower/Mast	<input type="checkbox"/> Horiz	<input type="checkbox"/> Frequency Agile
<input type="checkbox"/> CAP Corporate/Unit owned equipment:					
 <input type="checkbox"/> Member owned equipment:					
I hereby offer the Tennessee Wing, CAP, For Official CAP Business, the Member Owned Radio Equipment listed above, to be licensed under this application. I affirm that the Equipment is free of any liens or encumbrances. I understand that this Agreement gives the Tennessee Wing, CAP, Operational Control of the Equipment for Official Purposes, and that it may be used only for official business of CAP as defined by Current Regulations and other Official Purposes. This agreement may be terminated at any time, by either party, and for any reason. CAP will NOT be responsible for the condition of the Equipment, nor will CAP maintain or otherwise guarantee said equipment. The Equipment may not be used by other CAP personnel without the Applicant's consent or approval.					

We recommend the listed equipment/location and/or person be granted a station license and issued a Tactical Call Sign. We further understand that any CAP Corporate equipment issued by the TN Wing, will be actively used by the applicant on a regular basis, in Actual & Training Operations & Support, including Net participation. The issued call sign will change depending upon Duty Assignment & can be revoked by the Wing/CC.

Applicant (Printed Name)	Rank	Applicant (Signature)	Date	
Unit Communications Officer (Printed Name)	Rank	Unit Communications Officer (Signature)	Unit Charter TN -	Date
Group ___ Communications Officer (Printed Name)	Rank	Group ___ Communications Officer (Signature)	Date	
Tennessee Wing/DC (Printed Name)	Rank	Tennessee Wing/DC (Signature)	Approved	Date
<input type="checkbox"/> Y <input type="checkbox"/> N				