



Postal and Telecommunications Regulatory Authority of Zimbabwe

APPLICATION FOR NUMBERING ALLOCATION

1. NAME OF APPLICANT: (Attach Company Certificate of Incorporation)
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2. ADDRESSES AND TELEPHONE NUMBER OF APPLICANT:

- i) Postal address:
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- ii) Physical address:
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- iii) Telephone:
- iv) Fax:
- v) E-mail:

3. Details of telecommunication licence
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4. Purpose of numbering application
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5. Preferred numbering block / Type of Numbering Resource required (where applicable)

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6. Dates by which the allocation is required

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7. Date service is planned to be operation

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8. Utilisation of existing allocation

(i) Volume of numbers allocated to end-users

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(ii) Numbers allocated but not in use

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(iii) Reserved numbers

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9. Forecast of expected utilisation (over at least 3 years)

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10. Other relevant information

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Declaration

We, the undersigned chief executive officer and members of the Board of Directors of the applicant, do hereby certify that –

- a) all information given in response to and in support of the questions of this application is true and correct to the best of our knowledge and belief;
- b) this application is made in good faith with the purpose and intent that the affairs and business of the applicant will at all times be honestly conducted in accordance with good and sound business principles and in full compliance with all applicable laws and lawful directives from the Authority.

We acknowledge that the Postal and Telecommunications Regulatory Authority has the responsibility for administration of the National Telecommunications Numbering Plan in accordance with the Postal and Telecommunications Act (12:05)

We further certify that to the best of our knowledge and belief there are no other facts or information relevant to this application of which the Authority should be aware, and we pledge to promptly inform the Authority of any changes material to this application which may arise while it is being considered by the Authority. We hereby authorize the Authority and any of its authorized staff to make an inquiry or obtain any information from any source for the purpose of determining the correctness of all representations made in connection with this application or of assessing its merits.

Signed this day of 20.....

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 Chief Executive Officer (print name) Signature

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 Director (print name) Signature