



**Virginia**  
 2121 Cooperative Way, Suite 225  
 Herndon, VA 20171  
 Fax: 703-524-1074

**Maryland**  
 17750 Creamery Road, Suite B-10  
 Emmitsburg, MD 21727  
 Fax: 717-337-9157

800-482-8282  
 www.enterprisewireless.org

**Mobile/Portable-Only License Application**

Please complete the following information and return to EWA by fax to 703-524-1074 or 717-337-9157, by email to [customer.service@enterprisewireless.org](mailto:customer.service@enterprisewireless.org) or by mail to the Virginia address listed above. If you have questions, please call EWA at 800-482-8282.

**Note:** EWA may assess a fee for Form Preparation/Completion. This fee is \$205/members or \$275/non-members.

<u>Licensee Administrative Information</u>	<u>System Information</u>
Licensee Name _____	Address of Mobile Operation _____ (If different than mailing address above)
Corporation <input type="checkbox"/> Other (Please specify) _____	County _____ State _____
Authorized Licensee Contact _____	New <input type="checkbox"/> Modification (Provide Call Sign) _____
Street Address _____	Frequency Band <input type="checkbox"/> VHF (150-174 MHz) <input type="checkbox"/> UHF (450-470 MHz)
City _____ State _____ ZIP Code _____	Number of Portables _____ Number of Channels _____
Phone _____ Fax _____	Output Power _____ Watts ERP _____ Watts
Email _____	Emission Designator: <input type="checkbox"/> 25 kHz <input type="checkbox"/> 12.5 kHz <input type="checkbox"/> 6.25 kHz
Licensee Tax Identification Number (TIN/EIN) _____	7K60FXE/FXD <input type="checkbox"/> 4K00F1E/F1D <input type="checkbox"/> 11K2F3E <input type="checkbox"/> 20K0F3E <input type="checkbox"/> 8K10F1E
FCC Registration Number _____ ULS Password _____	Coordinates: _____ (N) _____ (W)
Eligibility: _____	Area of Operation: _____ kilometers County: _____
<hr/>	
Contact _____	
Contact Company: _____	
Phone: _____ Email: _____	

**Fee Calculation/Method of Payment**

Frequency Selection & Coordination (1-5 Channels) (\$135). FCC Filing Fees (New/\$170; Mod/\$70; Governmental/NA) \$ \_\_\_\_\_  
 Additional Channels in increments of 5 channels (\$135 per increment) \_\_\_\_\_  
 Establish FCC Registration Number/ULS Password (\$75 member or \$100 non-member) \_\_\_\_\_  
 Complete Required Notification of Construction (\$125 member or \$175 non-member) \_\_\_\_\_  
**Total Fee:** \$ \_\_\_\_\_

Check Sent/Enclosed  Apply Fee To Customer Drawdown Account Reference Number: \_\_\_\_\_

Please charge  VISA  Master Card  American Express  
 Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Signature \_\_\_\_\_