

# Application for licence fee exemption or concession



## Instructions for completion

- Print clearly. Forms which are illegible, unclear or incomplete details may be returned for clarification.
- Exemptions, if granted, apply only for the period of the licence and applicants will need to confirm their exempt status for each renewal period via email to [licensing@acma.gov.au](mailto:licensing@acma.gov.au)
- All applicants must complete sections A and F.
- All applicants should note the information provided in section G.
- Applicants seeking EXEMPTION, in their own right, should complete section B.
- Applicants seeking EXEMPTION because they assist an exempt body should complete section C. The exempt body that is being assisted should complete sections B and D.
- Applicants seeking CONCESSION should complete section E.

### Where to send this form

Please send completed forms to:

Radiocommunications Licensing and Assignments Section  
 Operations and Services Branch  
 Australian Communications and Media Authority  
 PO Box 78  
 Belconnen ACT 2616  
 Telephone: 1300 850 115  
 Fax number: 02 6219 5347  
 Email: [licensing@acma.gov.au](mailto:licensing@acma.gov.au)

## A Applicant's details

Do you hold a radiocommunications licence?

( ) Yes ( ) No

If yes, insert client number (if known)

Name

SURNAME
GIVEN NAMES

Organisation name (if applicable)

ABN/ACN (if applicable)

Postal address

POSTCODE

Residential or business address

POSTCODE

Contact details

WORK ( )
HOME ( )
MOBILE
FAX NUMBER ( )
EMAIL

## B Licence fee exemption

1. Is the transmitter or receiver to be operated solely or principally for the purposes of a body that is established to provide:

a) Surf Life Saving services?

( ) Yes ( ) No

b) Ambulance services in an area described in Schedule 2 of the *Income Tax Assessment Act 1936*?

( ) Yes ( ) No

2. Is the transmitter or receiver to be operated solely or principally for the purposes of a body that is:

- staffed principally by volunteers; and
- referred to under section 50.5; item 2.1 of section 50-10 or section 50-25 of the *Income Tax Assessment Act 1997* and the income of which is exempt; and

- established principally for the purposes of providing emergency services, or services to safeguard human life including rural fire fighting, search and rescue and coastguard services?

( ) Yes ( ) No

3. If the answer to 1(a) or 1(b) or 2 is YES, please indicate how the transmitter or receiver is being operated solely or principally for the purposes of the body?


4. If the answer to 2 is YES, please indicate the proportion of volunteers to paid staff?

5. Does the body carry out activities for the profit or gain of its individual members?

( ) Yes ( ) No

6. If the answer to 1(a) or 1(b) or 2 is YES, are you a body corporate, or a member of an unincorporated body?

( ) Yes ( ) No

If yes, indicate which

7. If you are a member of an unincorporated body, provide the name of the member issued with the licence on behalf of the organisation.

### C Assisting an exempt body

Is the transmitter or receiver to be operated for the sole or principal purpose of assisting an exempt body?

( ) Yes ( ) No

Exempt body's name

Postal address

<input type="text"/>
<input type="text"/>
<input type="text"/>

POSTCODE

### D Verification by exempt body

I declare that the person whose particulars are provided in section A operates radiocommunications equipment for the sole or principal purpose of assisting the exempt body whose particulars are provided in section B.

<input type="text"/>
SIGNATURE
<input type="text"/>
DATE

<input type="text"/>
PRINT FULL NAME
<input type="text"/>
POSITION IN EXEMPT BODY

### E Licence fee concession

Is the licensee:

a) The Royal Flying Doctor Service?

( ) Yes ( ) No

b) A person operating a narrowcasting service station under the licence to provide open narrowcasting television services for community and non-profit educational purposes?

( ) Yes ( ) No

### F Applicant's declaration

I declare that the particulars shown in this application, and in any accompanying documents, are true and correct in every detail.

<input type="text"/>
SIGNATURE OF AUTHORISED PERSON
<input type="text"/>
DATE

<input type="text"/>
PRINT FULL NAME
<input type="text"/>
TITLE

Are there any attachments to accompany this application? ( ) Yes ( ) No

### G Important information about third party authorisations

#### For exempt persons

A person who is exempt may *not* authorise other persons (third parties) to operate radiocommunications equipment covered by the licence unless those persons are similarly exempt.

#### For licensees eligible for licence fee concessions

An eligible person may *not* authorise other persons (third parties) to operate radiocommunications equipment covered by the licence unless those persons are similarly eligible for licence fee concessions or are exempt persons.