

Application for transfer of apparatus licence(s)

(In accordance with section 131AA of the *Radiocommunications Act 1992*)



Instructions for completion

- Print clearly. Forms which are illegible, unclear or incomplete may be returned for clarification.

Note:

- Giving false or misleading information is a serious offence.
- Information provided by the applicant that is marked with an asterisk (*) is required, by section 147 of the *Radiocommunications Act 1992*, to be disclosed to the public by the ACMA in a Register of Radiocommunications Licences. The Register is available for inspection at any ACMA office and on its website.
- Licences exempt from licence fees may only be transferred to similarly exempt persons or bodies.
- Persons granted licence fee concession may only transfer a licence to persons eligible for licence fee concession or exemption.
- From 1 January 2026, persons will be required to notify the Australian Competition and Consumer Commission (the ACCC) of certain acquisitions if they meet specified thresholds and must wait to receive approval before the acquisition can proceed. This may include the transfer of an apparatus licence if the specified thresholds are met. For more information please see the ACCC's information on [merger reforms](#).

Where to send this form:

- Completed form(s) must only be signed by the licensee and the proposed licensee, or by a person authorised to represent the licensee or proposed licensee, and should be sent by email to info@acma.gov.au or by mail to:
Customer Service Centre
Australian Communications and Media Authority
PO Box 78
Belconnen ACT 2616
- The transfer fee will be invoiced when the transfer application has been processed. Please see the [ACMA apparatus licence fee schedule](#) for the current transfer fee amount.
- If you have enquiries, email the ACMA Customer Service Centre on info@acma.gov.au or call 1300 850 115.

Current licensee's (seller) details

Client number

Name (or contact name if an organisation)

| |
|-------------|
| SURNAME |
| GIVEN NAMES |

Organisation name (if applicable)

ACN number (if applicable) ABN number (if applicable)

| | |
|--|--|
| | |
|--|--|

Postal address

| |
|----------|
| |
| |
| POSTCODE |

Residential or business address

| |
|----------|
| |
| |
| POSTCODE |

Contact details

| |
|------------------|
| WORK () |
| HOME () |
| MOBILE |
| FACSIMILE () |
| EMAIL |

Are you currently exempt from payment of licence fees?

☐ Yes ☐ No

Do you currently qualify for a licence fee concession?

☐ Yes ☐ No

Details of licence(s) to be transferred

| Licence number | Callsign* | Licence type* | Expiry date* |
|----------------|-----------|---------------|--------------|
| | | | |
| | | | |
| | | | |
| | | | |

Current licensee's declaration

I (a) declare that the information provided in this application, and in accompanying documents, is true and correct in every detail; and

(b) declare that I have the authority to agree to the transfer of the licence(s) as proposed in this application; and

(c) agree to the transfer of the licence(s) listed above.

SIGNATURE

NAME (PRINTED)

DATE

POSITION IN ORGANISATION (IF APPLICABLE)

Proposed licensee (buyer) details

Do you hold a radiocommunications licence?

☐ Yes ☐ No

If yes, insert client number

Name* (complete only if transferee is not an organisation)

SURNAME

GIVEN NAMES

Organisation name* (if applicable)

ACN number* (if applicable) ABN number (if applicable)

Trading name* (if applicable)

Postal address*

| |
|----------|
| |
| |
| POSTCODE |

Name of person representing the organisation

SURNAME

GIVEN NAMES

POSITION IN ORGANISATION

Residential or business address

| |
|----------|
| |
| |
| POSTCODE |

Contact details

WORK ()

HOME ()

MOBILE

FACSIMILE ()

EMAIL

Are you currently exempt from payment of licence fees?

☐ Yes ☐ No

Do you currently qualify for a licence fee concession?

☐ Yes ☐ No

ACCC merger control regime

Is this a notified acquisition, or an acquisition required to be notified, for the purposes of the *Competition and Consumer Act 2010* (CCA)? For more information please see the [ACCC's information on merger reforms](#).

☐ Yes ☐ No

If yes, please provide the following information in an attachment:

- the name, Australian Company Number and Australian Business Number (if any) of each notifying party (within the meaning of the CCA) of the notification of the acquisition
- any unique reference number or code that is used to identify the notified acquisition on the acquisitions register kept under section 61ABZZH of the CCA
- the effective notification date (within the meaning of the CCA) of the notification
- the end of the determination period (within the meaning of the CCA) for the notification.

If this is a notified acquisition that has been finally considered within the meaning of the CCA, what was the outcome of the ACCC's decision?

OUTCOME:

Qualifications (for maritime ship and amateur licences only)

Proposed licensee's qualifications

Certificate number (optional)

| | |
|--|--|
| | |
| | |
| | |
| | |

New client information—please complete if you are a new client

Client type

Government clients:

- ☐ Commonwealth department
- ☐ Other Commonwealth agency
- ☐ State government
- ☐ Local government

Private sector clients:

- ☐ Company
- ☐ Community/volunteer group
- ☐ Person aged 18 years and over
- ☐ Person aged under 18 years

Industry—tick which describes your primary function:

- ☐ Agriculture
- ☐ Communication services
- ☐ Construction
- ☐ Education
- ☐ Electricity/gas/water supply
- ☐ Government
- ☐ Health Services
- ☐ Mining
- ☐ Manufacturing
- ☐ Recreational and amateur activities
- ☐ Safety services
- ☐ Transport and storage
- ☐ Wholesale/retail trade
- ☐ Other: _____

Proposed licensee's (transferee's) declaration

I agree to the transfer of the listed licence(s) from the current licensee and I declare that the information provided by me in this application, and in accompanying documents, is true and correct in every detail and that equipment to be employed meets all relevant standards made by the ACMA. I declare that I have the authority to agree to the transfer of the licence(s) as proposed in this application.

Name of proposed licensee

SIGNATURE

NAME (PRINTED)

DATE

POSITION IN ORGANISATION (IF APPLICABLE)

Details of payment

The transfer fee will be sent by invoice when the licence transfer has been completed.

Please indicate who is paying this fee:

- ☐ current licensee (seller)
- ☐ proposed licensee (buyer).