



Independent Broadcasting Authority  
Mass Media Complex, Alick Nkhata Road, P.O. Box 32475 LUSAKA  
Tel: + 260 211 250584, + 260 211 250584 Cell: + 260 954 733 911

### SECTION I –APPLICANT DETAILS

- 1.1 Name of applicant (Company, Firm, Person).....
- 1.2 Business Name (if different from above).....
- 1.3 Address of applicant
  - (a) Physical Address.....
  - (b) Postal Address.....
- 1.4 Fixed Phone No. ....Mobile Phone No.....  
Fax No.....Email.....
- 1.5 Contact Person.....

### SECTION II –BROADCASTING SERVICE DETAILS

- 2.0 Tick radio broadcasting service being applied for  
 Amateur  AM  FM
- 2.1 Tick if you intend to deploy any of the broadcasting technologies below to increase coverage  
 Audio Streaming  Satellite TV Channels
- 2.2 Tick broadcasting category being applied for  
 Commercial  Educational  Community  Religious
- 2.3 State clearly your targeted audience .....

**SECTION III –LEGAL QUALIFICATIONS**

3.1 Applicant is (check one box)

Natural person

Legal person (corporation)

Other

3.2 Nationality of applicant if applicant is a natural person.....

3.3 If applicant is a corporation, identify the date and place where applicant is registered.

Date ..... Place.....

Attach to this application as Exhibit No.1 a verified copy of the applicant’s registration certification.

3.4 Name, address and citizenship (nationality) of director and each officer of the corporation.

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3.5 Name, address and nationality of each person authorized to vote in the corporation’s stock/shares. Also specify the percentage of stock each person is authorized to vote.....

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3.6 Name, address and nationality of each person owning stock/share in the corporation. Specify the number and percentage of shares owned by each person.....

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3.7 Total authorized shares of corporate stock.....

3.8 Total issued shares of corporate stock.....

3.9 Are there any documents, instruments, contracts or understandings (written), not already identified in this application, relating to current or future ownership interests in the applicant or rights to profits or income from the proposed operation of the broadcasting station?

Yes

No

If yes, attach to this application any such documents as Annexure No. 2.

3.10 Are there any documents, contracts or understandings (written or oral ), not already identified in this application, relating to programming or technical operation of the proposed station or any other aspect of the proposed stations (s) operation?

Yes

No

If yes, attach to this application any such documents, as Annexure No. 3. All understandings must be reduced to writing and included as part of Annexure No. 3.

3.11 Does the applicant or any part to this application or any member of the immediate family or any party to this application have interest as an owner, directors or officer in any broadcasting or other media in Zambia?

Yes

No

If yes state name of person and station.....

3.12 Has any adverse findings been made or any adverse final action been taken by any court of administrative body as to the applicant or any party identified in response to No. 2.5, 2.6 and 2.10 above?

Yes

No

If the answer is yes, attach as Annexure No. 4 a full disclosure of the person (s) and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), a statement of the facts upon which the proceeding is or was based or the nature of the offence alleged or committed, and a description of the current status or disposition of the matter.

**SECTION IV –FINANCIAL QUALIFICATIONS**

4.1 Attach as Annexure No. 5 a detailed itemization of the total costs of constructing the proposed station and the total cost of operating the station for one year after construction is completed. Costs must include infrastructure, staff and all other expenses.

4.2 Attach as Annexure No. 6 verified financial documentation signed by commission of oath which establishes the ability of each source to provide the funds noted.

4.3 Will any funds, credits or any other financial assistance for the construction, purchase or operation of the station (s) be provided by aliens, foreign entities, or domestic entities controlled by aliens, or their agents?

Yes  No

If yes, attach as Annexure No. 7 a full disclosure concerning this assistance.

**SECTION V – PROPOSED PROGRAMMING**

5.1 State details of any previous experience in broadcasting .....  
 .....  
 .....

5.2 In what language(s) will programming be broadcast .....

5.3 Proposed number of hours station will broadcasting each day (Specify Times of the day).....

5.4 Attach as Annexure No. 8 details of proposed programme schedule showing programming format.

- 5.5 Estimated percentage programming time to be:
- (a) Produced in Zambia by applicant .....
  - (b) Produced in Zambia by other organisations .....
  - (c) Relayed directly from foreign sources.....
  - (d) Obtained via other means from foreign sources.....

5.6. State percentage time allocated to:

Coverage of Zambia scene	:	%
Zambian Music	:	%
Other music	:	%
Zambian sport	:	%
International sport	:	%
Education broadcasts produced		%
In Zambia	:	%
Other Educational broadcasts	:	%

Public Service announcements and Programs	:	%
Community message	:	%
Advertising	:	%

5.7 State source of programming

Zambia news and current affairs	:
Foreign news and current affairs	:
Music	:
Advertising	:
Other	:

5.8 Station identification: .....

5.9 Call sign: .....

**SECTION VI – ENGINEERING**

In this section only fill the parts applicable to the broadcasting service you are applying for.

6.0 Studio Physical Location.....

6.1 Coverage

(a) Description of Coverage area.....

(b) Map of Service as annexure No. 9

6.2 Transmitter Location (Site)

(a) Physical Location .....

(b) GPS Coordinates : Latitude ..... Longitude.....

6.3 Transmitter Make and Model:.....

6.4 ZICTA Type Approved No. for the Transmitter.....

6.5 Studio to Transmitter (STL) Make and Model (if any) :.....

6.6 ZICTA Type Approved No. for the STL.....

6.7 Transmitter Frequency Band:.....

6.8 Radiated Power in Watts (Effective Radiated Power): .....

6.9 Feeder (Cable) Type:.....

6.10 Feeder (Cable) Length:.....

6.11 Antenna Details

(a) Antenna Type .....

(b) Antenna Gain (dB):.....

(c) Antenna Height (M): .....

(d) Polarization.....

(e) Omni or Directional :.....

6.12 Will any existing transmission facilities in Zambia be used?

Yes

No

If yes, identify owner and describe location of facilities to be used. Also describe manner in which facilities will be used and provide proof of contact with owner of facilities as Annexure No. 10.

6.13 Provide proof as Annexure No. 11 that the proposed site is available for the use intended by this application.

**CERTIFICATION**

I certify that the statements in this application are true and correct to the best of my knowledge and belief, and are made in good faith.

Name of Applicant

Signature of Chief Executive Officer

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Date.....

Title.....