



Form No.: STTO/FOR/010	Form Name: Attestation Form For Applications for Renewal of Telecommunication Licence	Revision No.: 0	Page 1 of 1
Original Issue Date: 2025-Dec-16	Approval By: Top Management	Revision Date: None	

*No Filed **MUST BE** left blank. If not applicable for the completion of this form, insert 'N/A' or 'not applicable' where appropriate.*

**ATTESTATION FORM
FOR APPLICATIONS FOR RENEWAL OF TELECOMMUNICATIONS LICENCE**

Section A: Licensee Information

Name of Licensee: _____

Section B: Changes to Services and/or Networks

Have there been any changes to the services and/or networks authorised under your existing licence?

☐ Yes ☐ No

If **Yes**, please describe the changes:

List all services currently being provided:

	List of Services	Is this a new Service? (Yes/No)	If Service is new, state date of implementation (yyyy/mm/dd)
1.			
2.			
3.			
4.			
5.			

- (Attach additional sheets if necessary.)

Supporting Documents Checklist (attach where applicable):

☐ Network modification details (See Technical Requirements Guidelines)

QUALITY POLICY STATEMENT

OUR RULES: The management and staff of the **OUR** are committed to **R**egulating **U**tility services in accordance with our **L**egislative powers and to the **E**nhancement of customer **S**atisfaction through continual improvement of our quality management system.

ISO 9001:2015 certified