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**Analogue Radio Technical Change Request Form**

This form should be used for any request to change the transmission arrangements of an analogue commercial radio or community radio service, for example:

* changing the transmission parameters at an existing transmission site (e.g. power increase)
* changing transmission site
* adding a new transmission site

Complete all relevant parts of this form. Incomplete forms will not be accepted.

Before completing this form, applicants are strongly advised to read our published coverage and planning policy for analogue radio broadcasting services, which can be found at:

<http://stakeholders.ofcom.org.uk/broadcasting/radio/coverage/pp_def/>.

**Part 1 – Applicant's details**

|  |  |
| --- | --- |
| **Licence number:** |  |
| **Licence area:** |  |
| **Licensee:** |  |
| **Station name:** |  |
| **Contact name:** |  |
| **Contact email address:** |  |
| **Contact telephone number:** |  |
| **Date of request:** |  |

**Part 2 – Current transmission details (complete one set of details for each existing transmission site)**

|  |  |
| --- | --- |
| **Site name:** |  |
| **Site address (including postcode):** |  |
| **Site owner:** |  |
| **National Grid Reference:** |  |
| **Site height (aod):** |  |
| **Antenna height (agl):** |  |
| **Aerial pattern:** |  |
| **Frequency:** |  |
| **Transmission power:** |  |

**Part 3 – Details of proposed change**

|  |
| --- |
| **Outline of proposed change**  *Set out details of the change(s) you wish to make to your transmission arrangements, and the reasons for your request e.g. is this a request to modify the transmission parameters at an existing site, to move to a new transmission site, or to add a new transmission site(s)?* |
| **Proposed change:** |
| **Reasons for requesting proposed change:** |

If you are proposing to **change the transmission parameters at an existing site**, go to **Part 4** of this application form.

If you are requesting permission to **move to a new transmission site, or add one or more new transmission sites** to your licence, go to **Part 5** of this application form.

**Part 4 – Modification to existing transmission site(s)**

Complete the following section if your request is to modify the transmission parameters (e.g. power increase, change to aerial pattern) at an existing transmission site.

If you are requesting permission to make modifications at more than one existing transmission site, complete one set of details for each such site.

**1.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Current transmission details** | | **Proposed new transmission details** | |
| *Site name*: |  | *Site name*: |  |
| *Site address*: |  | *Site address*: |  |
| *Site owner*: |  | *Site owner*: |  |
| *NGR:* |  | *NGR:* |  |
| *Site height:* |  | *Site height:* |  |
| *Antenna height:* |  | *Antenna height:* |  |
| *Aerial pattern:* |  | *Aerial pattern:* |  |
| *Frequency:* |  | *Frequency:* |  |
| *Transmission power*: |  | *Transmission power*: |  |
| **Date you wish proposed change to be implemented:** | | |  |

**2.** For each site, please provide:

* A map showing the predicted noise-limited coverage at 48 dBµV/m and 54 dBµV/m using the proposed new transmission parameters.
* Projected adult (aged 15+) population coverage using the proposed new transmission parameters.

If you are requesting changes to more than one transmission site, please also provide a map showing the composite of the predicted noise-limited coverage, and the total projected adult population coverage, using the proposed new transmission parameters at each site.

## 3. Please list all services with considerable signal levels with which your service has a frequency relationship and describe the methodology used to show that the proposed change(s) will not cause listener disenfranchisement, or increase levels of outgoing interference.

*For each service considered, which method of assessment has been used to evaluate compatibility?*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Offset*** | ***MHz*** | ***Stations considered*** | ***Method*** |
| + 400 kHz |  |  |  |
| + 300 kHz |  |  |  |
| + 200 kHz |  |  |  |
| + 100 kHz |  |  |  |
| co-channel |  |  |  |
| - 100 kHz |  |  |  |
| - 200 kHz |  |  |  |
| - 300 kHz |  |  |  |
| - 400 kHz |  |  |  |

*What possible overlaps are there to other local services separated by?*

|  |  |  |
| --- | --- | --- |
| ***Offset*** | ***MHz*** | ***Station*** |
| - 10.8 MHz |  |  |
| - 10.7 MHz |  |  |
| - 10.6 MHz |  |  |
| + 10.6 MHz |  |  |
| + 10.7 MHz |  |  |
| + 10.6 MHz |  |  |

**Part 5 – Proposed new site(s)**

Complete the following section if your request is to move to a new transmission site, or to add one or more new transmission site to your existing site(s).

If you are requesting permission to move to, or add, more than one new transmission site, complete one set of details for each such site.

**1.**

|  |  |
| --- | --- |
| **Site name:** |  |
| **Site address (including postcode):** |  |
| **Site owner:** |  |
| **National Grid Reference:** |  |
| **Site height (aod):** |  |
| **Antenna height (agl):** |  |
| **Aerial pattern:** |  |
| **Frequency:**  *This section should be completed only if you are requesting a site move* |  |
| **Transmission power:** |  |

**2.** For each new site, please provide:

* A map showing the predicted noise-limited coverage at 48 dBµV/m and 54 dBµV/m using the proposed transmission parameters.
* Projected adult (aged 15+) population coverage using the proposed transmission parameters.

If you are requesting changes to move to, or add, more than one transmission site, please also provide a map showing the composite of the predicted noise-limited coverage, and the total projected adult population coverage, using the proposed transmission parameters at each site.

## 3. Please list all services with considerable signal levels with which your service has a frequency relationship and describe the methodology used to show that the proposed change(s) will not cause listener disenfranchisement, or increase levels of outgoing interference.

*For each service considered, which method of assessment has been used to evaluate compatibility?*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Offset*** | ***MHz*** | ***Stations considered*** | ***Method*** |
| + 400 kHz |  |  |  |
| + 300 kHz |  |  |  |
| + 200 kHz |  |  |  |
| + 100 kHz |  |  |  |
| co-channel |  |  |  |
| - 100 kHz |  |  |  |
| - 200 kHz |  |  |  |
| - 300 kHz |  |  |  |
| - 400 kHz |  |  |  |

*What possible overlaps are there to other local services separated by?*

|  |  |  |
| --- | --- | --- |
| ***Offset*** | ***MHz*** | ***Station*** |
| - 10.8 MHz |  |  |
| - 10.7 MHz |  |  |
| - 10.6 MHz |  |  |
| + 10.6 MHz |  |  |
| + 10.7 MHz |  |  |
| + 10.6 MHz |  |  |

(Sept 2013)