

R	FCC License Renewal E-Z	R
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Check here if you've made changes to your radio **system!**

To: _____ Date: _____

1.	
Licensee Name: _____	
Contact Person: _____	Call Sign: _____ Expiration Date: _____
Street Address: _____	EMAIL: _____
City, State, Zip: _____	County: _____
Phone: _____	Fax: _____ Mobile: _____
Referred to Atlas by: <input type="checkbox"/> Website <input type="checkbox"/> Advertisement <input type="checkbox"/> Mail <input type="checkbox"/> Other (<i>Please Specify</i>): _____ <input type="checkbox"/> Dealer (<i>Please Specify</i>): _____	
<p>The applicant named above gives Atlas License Company and Data Services authority to submit this renewal application on its behalf. The applicant also grants permission for Atlas to obtain passwords as needed from the FCC for purposes of electronic filing processes pertaining to this renewal application. The applicant confirms the information given to Atlas, and answers to questions on all forms is complete and accurate. The applicant / licensee is solely responsible for fines or penalties resulting from violations of FCC rules and regulations or any other Federal, State, or Local law or ordinance. The information submitted will be reviewed by the FCC and inaccuracies or inconsistencies could lead to fines or penalties. Services are provided subject to the limitations of liability and other conditions contained in Atlas' Terms of Service. By signing below, the applicant agrees to Atlas' Terms of Service. The person signing on behalf of the applicant represents that he or she has authority to sign this document and to bind the applicant.</p>	
Licensee's Authorized Signature: X _____	Date: _____
<i>(or Licensee's Authorized Representative)</i>	
Please Print Signer's Name: _____	Title: _____
Please enter your nine-digit tax ID number: _____ (SSN or EIN) <i>(The number provided when completing IRS W-9.)</i>	

2.
Subscribe to License Guard® Expiration Protection for <u>guaranteed</u> notification several months prior to license expiration. <i>License Guard® Terms and Conditions available at: http://www.alcds.com/license-guard.html</i>
Add \$80.00 below to subscribe!

3.																			
<table style="width:100%; border-collapse: collapse;"> <tr> <td>Total base fee for license renewal without technical changes:</td> <td><input type="checkbox"/></td> <td>\$</td> <td rowspan="6" style="text-align: center; vertical-align: middle;"> <i>This form is your bill. It includes applicable FCC fees. Be sure to return a copy of this bill with your payment.</i> </td> </tr> <tr> <td>Add \$75 to Remove Wide Band Designators:¹</td> <td><input type="checkbox"/></td> <td>\$</td> </tr> <tr> <td>Add \$80 for License Guard® Expiration Protection - Guaranteed:</td> <td><input type="checkbox"/></td> <td>\$</td> </tr> <tr> <td>Add \$25 for changes to mailing address, phone, contact:</td> <td><input type="checkbox"/></td> <td>\$</td> </tr> <tr> <td>Express Filing Required (10 Business Days or less to Expiration) Add \$100:</td> <td><input type="checkbox"/></td> <td>\$</td> </tr> <tr> <td>Add the Above Items for Total Amount Due:</td> <td></td> <td>\$</td> </tr> </table>	Total base fee for license renewal without technical changes:	<input type="checkbox"/>	\$	<i>This form is your bill. It includes applicable FCC fees. Be sure to return a copy of this bill with your payment.</i>	Add \$75 to Remove Wide Band Designators: ¹	<input type="checkbox"/>	\$	Add \$80 for License Guard® Expiration Protection - Guaranteed:	<input type="checkbox"/>	\$	Add \$25 for changes to mailing address, phone, contact:	<input type="checkbox"/>	\$	Express Filing Required (10 Business Days or less to Expiration) Add \$100:	<input type="checkbox"/>	\$	Add the Above Items for Total Amount Due:		\$
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Add \$80 for License Guard® Expiration Protection - Guaranteed:	<input type="checkbox"/>	\$																	
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Express Filing Required (10 Business Days or less to Expiration) Add \$100:	<input type="checkbox"/>	\$																	
Add the Above Items for Total Amount Due:		\$																	
Atlas must receive this completed form and full payment more than 10 business days prior to the license expiration date or a \$100.00 Express Filing Fee WILL apply in addition to the standard renewal fee. Renewal applications received after the expiration date cannot be filed without a waiver, at additional expense. PAYMENT AND A COMPLETED, SIGNED RENEWAL FORM MUST BE RECEIVED BEFORE YOUR RENEWAL IS FILED.																			
<input type="checkbox"/> Check (<i>Make check payable to "Atlas" and mail with this form.</i>)																			
<input type="checkbox"/> Invoice – PO # Required:																			
<input type="checkbox"/> Credit Card* <i>Atlas accepts American Express, Diners Club, Discover, MasterCard, & Visa</i>																			
Card Number: _____ Exp. Date: _____ CVV2 (sec code) : _____																			
*Credit card users acknowledge authorization of services in the amount shown above and agree to perform the obligations set forth in the Cardholder's Agreement with the issuer.																			
Sign: X _____ Date: _____																			
Please legibly PRINT signer's name.																			
Name appearing on Credit Card, if different from above:																			
Billing Address for Credit Card (Street, City, State & Zip):																			

¹ Per FCC Public Notice of March 6, 2014: Licenses with wideband emission designators should be modified to remove them to prevent dismissal of a renewal application.