

# Application for Issue of a Site Certificate

as evidence to ensure, under the Ordinance concerning the Controls for the Limitation of Electromagnetic Fields (BEMFV), the protection of persons exposed to electromagnetic fields caused by the operation of fixed radio transmitters

Applicant:

Telephone:

Street / house no:

Fax:

(Postcode) town:

Contact name:  
(for further inquiries)

Email:

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## Information on the site of the fixed radio transmitter(s) for which a site certificate is requested:

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(Street / communal district)	(House no / field / lot)	(Postcode)	(Town)
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(Operator's identity no)	(Number of certificate) (if a site certificate has already been issued)
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Coordinates*) eastern longitude (WGS 84)	Height of building or height of mast/tower
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Coordinates\*) northern latitude  
(WGS 84)

\*) Geographical coordinates, degrees, minutes, seconds

There are other fixed transmitters at the site  Yes  No

The shortest distance between the lowest point of the antenna mounted at the lowest level and the limits of the controllable area (controllable area within the meaning of the BEMFV) is : \_\_\_\_\_ metres

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## Enclosed with this application is:

Annex 1 (Data sheet (details relating to the fixed radio transmitter for which a site certificate is requested) \_\_\_\_\_ page(s)

Annex 2 (In case of shared use of a site) \_\_\_\_\_ page(s)

Annex 3 (Antenna diagram\*\*) \_\_\_\_\_ page(s)

Annex 4 (Layout plan (detail from a map, detail from the local building or land development plan) which shows the property and/or buildings adjacent to the site of operation of the radio transmitter for which a site certificate is requested, and their **use** \*\*) \_\_\_\_\_ page(s)

Annex 5 (Where a transmitting antenna is mounted on a construction, a construction drawing or sketch of the construction with measurements (side view and top view) showing the mounting site of the radio transmitter\*\*) \_\_\_\_\_ page(s)

\*\* in duplicate

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(Date

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(Signature of the applicant)

### **Please note:**

As regards fixed radio transmitters operated above 50 MHz, the operator must provide appropriate protection to users of active medical devices in the danger area specified for such users. A documentation of the measures taken must be kept available and submitted to the responsible authority upon request.

**The applicant is required to fill in a separate column for each transmitting antenna.**

			A	B	C	D	E	F	G
<input type="checkbox"/>	1	Radio system:							
<input type="checkbox"/>	2	System designation:							
<input type="checkbox"/>	3	Height of the lowest point of the transmitting antenna above ground in metres:							
<input type="checkbox"/>	4 a	Pointing direction of maximum radiation N over O:							
<input type="checkbox"/>	b	Vertical tilt by mechanical means of the pointing direction of maximum radiation (angle or angular range in degrees)							
<input type="checkbox"/>	c	Vertical tilt by electronic means of the pointing direction of maximum radiation (angle or angular range in degrees)							
<input type="checkbox"/>	5	Planned operating frequency (in case of several operating frequencies, the one with the most stringent limit) in MHz							
<input type="checkbox"/>	6 a	Type of antenna:							
<input type="checkbox"/>	b	Details of polarisation (per radio system)							
<input type="checkbox"/>	7 a	For reflector antennas:	d in m						
<input type="checkbox"/>	b		and A in m <sup>2</sup> respectively						
<input type="checkbox"/>	8	Peak envelope power per channel at the transmitter output in watts:							
<input type="checkbox"/>	9	Number of channels:							
<input type="checkbox"/>	10	Loss between transmitter output and antenna input in dB:							
<input type="checkbox"/>	11 a	Antenna gain in dBi:							
<input type="checkbox"/>	b	Antenna gain in dBd:							
<input type="checkbox"/>	12	Shortest distance between the lowest point of the transmitting antenna and the limits of the controllable area.							

### **Trade and operating secrets**

The items marked with a cross in the first column of this data sheet are trade and operating secrets of the applicant.

(Please mark with a cross, where applicable.)

## Annex 2: Application for a site certificate

relating to the application of

### Shared use of a site

List of all operators (branch office, where applicable) sharing use of the site of the fixed radio transmitter for which a site certificate is requested:

	Operator	Contact name	Street	Postcode	Town	Telephone	Email
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							