

**VIRGINIA WING CIVIL AIR PATROL  
REQUEST FOR RADIO STATION AUTHORIZATION**

APPLICANT'S NAME and RANK	CHARTER NO.	CAP I.D. NUMBER
MAILING ADDRESS	CAP CALL (if any)	ROA CARD NO.
City	State	Zip Code + 4
HOME TELEPHONE NUMBER		

Above blocks are required information.

WORK TELEPHONE NUMBER	CELLULAR NUMBER	E-MAIL ADDRESS
MARS CALL	AMATEUR LICENSE CLASS AND CALL	COMMERCIAL LICENSE CLASS AND NO.
STATION LONGITUDE	STATION LATITUDE	ADDITIONAL CONTACT INFORMATION

Above blocks are optional. If you do not want the information published leave blank. All information published is restricted to CAP membership.

<input type="checkbox"/> New Station	<input type="checkbox"/> Modify	<input type="checkbox"/> Renewal	<input type="checkbox"/> Transfer	<input type="checkbox"/> Other _____
CHECK ONLY ONE BLOCK				

Non-VAWG member, Pager Only, Etc.

RADIO INFORMATION						
TYPE VHF, HF, ELT, ETC.	MANUFACTURER NAME	MODEL NUMBER	SERIAL NUMBER	COMPLIANCY NTIA <sup>1</sup> and or FCC	DATE OF LAST CALIBRATION <sup>2</sup>	CAP PROPERTY # or Private Ownership

- For use on CAP, military, Federal frequencies the radio must be NTIA compliant. For use on FAA or non-Federal frequencies the radio must be FCC approved.
- As required by CAP regulation 100

<input type="checkbox"/> Power Generator	<input type="checkbox"/> Backup Battery	<input type="checkbox"/> CAP Pager	<input type="checkbox"/> Other Communication Capabilities	_____
CHECK ALL THAT APPLY				Use back of form if needed.

<b>READ THIS SECTION CAREFULLY BEFORE SIGNING</b>		
<p><b>Go to the National CAP web site and keep contact information current. National data supercedes data on this form unless it is missing.</b></p> <p>I hereby offer to Virginia Wing Civil Air Patrol the above listed items of communications equipment owned by me.</p> <p>I understand that by signing this agreement, I give Virginia Wing CAP operational control of the above equipment while being used for CAP purposes.</p> <p>I understand the relevant CAP, FAA, FCC, NTIA regulations governing the use of this equipment, and will comply with them at all times.</p> <p>I will ensure that CAP Radio Frequencies are used only for the official business of CAP, and I will take any necessary measures to prevent unauthorized personnel from using these frequencies.</p> <p>I understand that this agreement may be terminated at any time for any reasonable cause.</p> <p>The above listed equipment may not be used by other CAP Personnel without my prior consent or approval.</p> <p>I further understand that Virginia Wing CAP will in no way maintain, guarantee or insure this equipment.</p> <p>I also understand that if other CAP personnel use this equipment, Virginia Wing CAP will not be responsible for the condition in which it was returned.</p> <p>I also certify that all statements made on this application, and any attachments thereto, are true and complete to the best of my knowledge.</p> <p>I certify that the above listed equipment is free of any liens or encumbrances.</p>		
SIGNATURE OF APPLICANT	SIGNATURE OF UNIT COMMANDER	DATE

FOR WING USE ONLY -- DO NOT WRITE IN BLOCKS BELOW			
CALL SIGN	DATE ISSUED	DATE EXPIRES	WING LICENSING OFFICER

**Submit signed original and copy of this form with SASE for each request directly to the Wing Radio Station Licensing Officer.**