



Regulatory
Authority
of Curaçao

APPLICATION FORM

Radio/TV recordings.

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Radio/TV recordings



GENERAL

In order to receive previously aired radio or TV broadcasts specific information is required.

In this application form the required information has been specified in the following sections:

SECTION 1: Information about the applicant.

SECTION 2: Specifications of the required recorded radio/TV programme.

Please fill in the form in capital letters (block letters).

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SECTION 1: INFORMATION ABOUT THE APPLICANT

1.1. Type of applicant. (Check the box that is applicable.)

- Private
- Government organization (Public)

1.2. Information about the applicant.

- Name :
- Last name :
- Address :
- Date of birth :
- Company/organisation :
- Telephone No. (Fixed) :
- Telephone No. (Mobile) :
- Fax number :
- E-mailaddress :

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SECTION 2: SPECIFICATIONS REQUIRED RECORDING

2.1. Recording specifications. (Check the box that is applicable.)

- TV recording Skip question 2.2

- Radio recording Skip question 2.3

2.2. Specifications radio station and radio programme.

- Name radio station : _____

- Frequency radio station : _____

Name of the required radio recording (fill in the name of the radio programme)	Date of broadcast radio programme		Time of broadcast radio programme (am or pm)		
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.
	/	/20	From	To	h.

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2.3. Specifications TV station and TV programme.

- Name TV station : _____
- TV channel : _____

Name of the required TV recording (fill in the name of the TV programme)	Date of broadcast TV programme	Time of broadcast TV programme (am or pm)		
	/ /20	From	To	h.
	/ /20	From	To	h.
	/ /20	From	To	h.
	/ /20	From	To	h.
	/ /20	From	To	h.
	/ /20	From	To	h.
	/ /20	From	To	h.
	/ /20	From	To	h.