APPLICATION FORM FOR POSTAL, COURIER AND TELECOMMUNICATIONS LICENCES

SECTION A: INSTRUCTIONS

1. This application should be completed in English and any document in foreign language must be translated into English.
2. The application should be addressed to the Director General with a cover letter summarizing the profile of the applicant and the licence/s applied for.
3. The application should be accompanied by
    a) an affidavit indicating the licence category being applied and enclosing certified copies of the documents listed under section B;
    b) a completed universal form; and
    c) information package under the respective licencein section C.
4. All applicable fees shall be paid through the eCitizen platform. To pay, visit https://ca.ecitizen.go.ke/ and follow the payment guidelines. For assistance, applicants may contact the Finance and Accounts Department via accounts@ca.go.ke. The Accounts Office is open on weekdays from 9:00 a.m. to 12:00 noon and from 2:00 p.m. to 4:00 p.m., excluding public holidays.
5. Completed application form should be presented at our offices at CA Centre Waiyaki Way OR any of the regional offices OR electronically via telecomlicensing@ca.go.ke (for telecom applicants) and postallicensing@ca.go.ke (for Postal and Courier applicants) with the email subject clearly indicating the **[applicant name]** and **[applied licence category].**

SECTION B: REQUIRED DOCUMENTATION

1. Cover Letter
   A cover letter, signed by the applicant, addressed to the Director General on Applicant's letterhead. For Government Entities, the Application letter should be signed by Institution's Chief Executive Officer.
2. Affidavit

2.1. Duly executed affidavit stating:
    a) The specific category of licence being applied.
    b) That all applicable documents as listed in section B of this application form are true and certified copies of the originals.

2.2. If the affidavit is sworn in Kenya, the accompanying documents must be commissioned and/or certified as true copies of the original.

2.3. If an affidavit is sworn in a foreign jurisdiction, the accompanying documents must be duly notarised.

3. Legal Registration Documents

3.1. Clear Copy of Certificate of Incorporation/Registration Certificate or equivalent.

3.2. Kenya Government Agencies/bodies should provide a copy of the Statute/Act, gazette notice or other relevant legal instrument creating the agency/body.

4. Ownership and Shareholding

4.1. Where applicable, provide a clear copy of certificate of shareholding (CR12) or equivalent from the Registrar of Companies listing the directors and shareholders of

the company and details of their nationality and shareholding – (***CR12 should not be older than two (2) months from the date of issue at the point of application)***. Where a corporate entity appears as a shareholder, provide the corresponding CR12 or equivalent up to the second level of ownership.

4.2. Copies of valid National Identity Cards (ID) / passport bio data page for all directors and shareholders of the Applicant.

5. Listed Companies: Certificate/letter from Capital Markets Authority (CMA), if the company is listed in a stock exchange in Kenya.

6. Additional requirements for foreign companies: A Certificate of Compliance issued by the Registrar of Companies in Kenya. In this case, the CR12 provided shall indicate the local representative and the directors of the company.

7. Tax Compliance: Clear copy of valid Tax Compliance Certificate.

8. Copy of the relevant documents as listed below where applicable:

   8.1. Co-operative Society's By-Laws, Membership Agreement Terms and Conditions, Minutes of its AGM authorizing venture in the service for which the licence is sought; or

   8.2. Constitution of the Society Membership Agreement Terms and Conditions and Minutes of its AGM authorizing venture into the service for which the licence is sought; or

   8.3. Partnership Deed for business partnerships.

9. Additional requirements for licence transfer:

   9.1. Application letter from the transferor together with a certified Board Resolution approving the proposed licence transfer.

   9.2. Letter from transferee as well as their latest CR12 (should not be older than two (2) months from the date of issue at the point of application) and valid Tax compliance certificate.

10. Community Network Service Providers: A Community Network Service shall:

   10.1. be fully controlled by a non-profit CBO, society, or NGO serving a specific community at sub-county level, especially where ICT access is limited; and

   10.2. be owned, run, and managed by the community, staffed by local members, and may receive technical, financial, or administrative support from any entity.

11. Submission of a Business Plan as guided in section II, III, IV, V, VI, VII and VIII.

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SECTION C: GUIDE AND APPLICABLE LICENCE

Please tick as appropriate to your application

LICENCE APPLIED

Guide	Applicable Licences	Tick
TELECOM LICENCES		
II. INFRA	INFRASTRUCTURE NETWORK (NFP-T1, T2, T3, CNSP, MNSP)	☐
III. INTL	INTERNATIONAL SYSTEMS (LRA, IGSS)	☐
IV. SERV	SERVICES (ASP, CSP, ECSP, Dot KE, BPO)	☐
V. EQUIP	EQUIPMENT (CED, CEC)	☐
VI. PERS	TECHNICAL PERSONNEL	☐
VII. VSAT	PRIVATE VSAT	☐
POSTAL AND COURIER LICENCES		
VIII. P&C	PUBLIC POSTAL OPERATOR (PPO), INTERNATIONAL POSTAL AND COURIER OPERATOR (IPO), COURIER HAILLING SERVICE PROVIDER (CHSP), NATIONAL POSTAL AND COURIER OPERATOR (NPO)	☐

COMMUNICATIONS AUTHORITY OF KENYA

APPLICATION FORM FOR POSTAL, COURIER AND TELECOMMUNICATIONS LICENCES

I. UNIVERSAL APPLICATION FORM

TYPE OF APPLICATION

New Application		**Transfer**		**Renewal**	

1. APPLICANT DETAILS

Name of Applicant:

Physical Address:

County: .....Town..... Street/Road.....

Name of Building..... Floor ..... Room.....

Postal Address:

P. O. Box..... Postal Code .....Post Office Town.....

Phone Contacts:

Primary. Tel.No. ..... Secondary Tel. No. .....

Email Address: .....

1st Contact Person

Full Name

Postal Address: .....

P. O. Box.....Postal Code .....Post Office Town.....

Phone Contacts:

Primary. Tel.No. ..... Secondary Tel. No. .....

Email Address: .....

2nd Contact Person

Full Name

Postal Address: .....

P. O. Box.....Postal Code .....Post Office Town.....

Phone Contacts:

Primary. Tel.No. ..... Secondary Tel. No. .....

Email Address: .....

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2. ADDITIONAL INFORMATION

2.1 Related Licensed Interests

Do any of the applicant's directors, shareholders, partners, or beneficial owners hold an interest in any entity licensed by the Authority? Yes/No.

If yes, please provide details:

.....

2.2 Insolvency and Legal Status

Has the applicant, or any director, shareholder, or partner, been declared bankrupt, or been adjudged legally incapable of managing their affairs? Yes/No.

If yes, please provide details:

.....

3. DECLARATION

Where applicable, attach a Power of Attorney or other documentary evidence authorising the signatory to act on behalf of the applicant.

I hereby declare that the information provided in this application and the accompanying documents is true, complete, and correct to the best of my knowledge and belief. I also understand that it is an offence under the Penal Code to give false information in support of any application.

Name.....

Designation.....

Signature.....

Date.....Company Stamp.....

FOR OFFICIAL USE ONLY

Official Stamp of the Authority upon receipt of this application.

APPLICATION FORM FOR POSTAL, COURIER AND TELECOMMUNICATIONS LICENCES

II. GUIDE FOR INFRASTRUCTURE NETWORK (NFP-T1, T2, T3, CNSP, MNSP)

1. LICENCE CATEGORY

Indicate the following in detail

i. Choose and indicate Licence Category Applied For from
   a. Network Facilities Provider Tier 1
   b. Network Facilities Provider Tier 2
   c. Network Facilities Provider Tier 3
   d. Community Networks and Services Provider
   e. Micro-Network and Service Provider

ii. Proposed Technology Platform (Mobile, Fibre Optic, Fixed Wireless, Mixed, Other (specify)

iii. Licensed Geographic Scope Applied For

iv. Optional 25-Year Term for NFP-T1/T2 only

2. NETWORK ROLLOUT PLAN

Attach a full 5-year Network Rollout Plan indicating the milestone description, counties/area coverage, population target and capital expenditure estimate for each year, Quality of Service provisions.

3. SPECTRUM REQUIREMENTS

Indicate in detail the following information: the Frequency Band(s) Required, Spectrum Assignment Type, Current Spectrum Holdings (if any) and whether a separate Spectrum Application been submitted?

4. INFRASTRUCTURE AND TECHNICAL DETAILS

Indicate in detail the following information: Core Network Location(s) in Kenya, Network Operations Centre (NOC) Address in Kenya, NOC Operating Hours, Planned Data Centre(s) Location(s) and proposed Interconnection Strategy with other licensees.

5. WHOLESALE ACCESS COMMITMENT

Indicate in detail your commitment to provide wholesale access to other licensees.

6. FINANCIAL CAPACITY FOR INFRASTRUCTURE INVESTMENT

Provide the projected expenditures (CAPEX and OPEX) and Annual Gross Turnover for the next 3 years, and the funding sources.

7. SPECIFIC DETAILS REQUIRED OF COMMUNITY NETWORK SERVICE PROVIDERS

Indicate in detail the following information: Name of Community/Organisation, Community Description, Licensed Area Applied For, Governance Structure, Technology to be Used, Number of Households / Community Members to be Connected and the Funding Source(s) For Network Roll Out.

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III. GUIDE FOR INTERNATIONAL SYSTEMS (Landing Rights Authorization and International Gateway)

1. LICENCE CATEGORY (INTERNATIONAL SYSTEMS)

Indicate the Licence Category Applied For and Optional 25-Year Term? (IGSS only)

2. LANDING RIGHT AUTHORIZATION (SUB-MARINE CABLE SYSTEM INFORMATION - complete if applicable)

Provide the following in detail:

i. Submarine Cable System Name(s)
ii. Number of Cable Systems to be Landed
iii. Proposed Landing Station(s) Location in Kenya
iv. Has a Cable Consortium Agreement been executed?
v. Proposed Cable Activation Date
vi. Total Cable System Capacity
vii. Will any Transit Cable arrangements be included?
viii. Quality of Service provisions
ix. Provide the projected expenditures (CAPEX and OPEX) and Annual Gross Turnover for the next 3 years, and the funding sources.

3. LANDING RIGHT AUTHORIZATION (SATELLITE FOOTPRINT DETAILS - complete if applicable)

Provide the following in detail:

i. Satellite Operator Name(s)
ii. Frequency Bands of operation, satellite antennae and signal parameters
iii. Also provide the following information where applicable: Orbital Position(s) and type, launch parameters such as date, constellation, fixed/mobile station, proposed location of Earth Station in Kenya

4. INTERNATIONAL GATEWAY SYSTEMS AND SERVICES INFRASTRUCTURE

Provide the following in detail:

i. Satellite Earth Station Location(s) in Kenya
ii. Submarine Cable Landing Station Address in Kenya
iii. SLTE Location and Cross-Connect Facility Location in Kenya
iv. Network Operations Centre (NOC) Address in Kenya
v. Proposed Date for NOC to Become Operational
vi. International Destinations to be Served
vii. Will you offer international wholesale capacity to other licensees?
viii. Quality of Service provisions
ix. Provide the projected expenditures (CAPEX and OPEX) and Annual Gross Turnover for the next 3 years, and the funding sources.

APPLICATION FORM FOR POSTAL, COURIER AND TELECOMMUNICATIONS LICENCES

IV. GUIDE FOR SERVICES (ASP, CSP, ECSP, Dot KE, BPO)

1. LICENCE CATEGORY (SERVICES)

Choose and indicate Licence Category Applied For (**ASP, CSP, ECSP, Dot KE, BPO**) and whether you opt for a 15 or 25-Year Term? (ASP/CSP only).

2. BUSINESS PLAN AND SERVICE DESCRIPTION (ASP, CSP, ECSP only)

Provide a detailed Business Plan indicating a description of Services to be Provided, technical diagram indicating your business architecture's relation with other telecom infrastructure architecture, Target Market / Customer Segment, Intended Geographic Coverage of Services, Estimated/projected 3-year Subscriber / Customer Numbers for Year 1/2/3, Projected Annual Gross Turnover at Year 1/2/3 and the funding sources.

3. ASP-SPECIFIC DETAILS

Provide a detailed description of the following: the Service Type Offerings, Name of NFP-Tx Wholesale Infrastructure Partner(s), Required numbering resources where applicable.

4. CSP-SPECIFIC DETAILS

Provide in detail Content Categories to be Distributed and Delivery Mechanism.

5. ECSP-SPECIFIC DETAILS

Submit a Certificate Practice Statement.

6. BPO-SPECIFIC DETAILS

Provide a detailed description of the following: BPO Services to be Provided, Clients to be Served, Planned staff headcount at Year 1/2/3, BPO Premises Address in Kenya

COMMUNICATIONS AUTHORITY OF KENYA

V. GUIDE FOR EQUIPMENT (CED, CEC)

1. LICENCE CATEGORY (SERVICES)

Indicate the Licence Category Applied For from list below:

a) Communications Equipment Distributor
b) Communications Equipment Contractor

2. CEC — COMMUNICATIONS EQUIPMENT CONTRACTOR

Provide a detailed description

i. Type of Contract Works
ii. Primary equipment suppliers

3. CED — COMMUNICATIONS EQUIPMENT DISTRIBUTOR

Provide a detailed description

i. Types of Equipment to be Imported / Distributed
ii. Names of Principal Equipment Manufacturers / Suppliers
iii. Estimated annual import volume (units)
iv. Estimated annual gross revenue from equipment distribution
v. Warehouse / Storage Facility Address in Kenya
vi. After-sales support capacity
vii. Anti-counterfeit measures in place?

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VI. GUIDE FOR TECHNICAL PERSONNEL APPLICATION

1. LICENCE CATEGORY AND CLASS

Indicate the Licence Type, Class Applied For

Scope of Works Applied For TP (Engineering only)

2. PERSONAL DETAILS

Provide the following details:

i. Full Name (as per National ID / Passport) *

ii. National ID Number / Passport Number

iii. Nationality

iv. Current Employer and address (if employed)

3. ACADEMIC QUALIFICATIONS

Attach certified copies of all academic certificates.

4. PROFESSIONAL CERTIFICATIONS (where applicable)

5. WORK EXPERIENCE

Indicate Employer / Client Name, Nature of Work, Period (From–To), Reference Contact where applicable

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VII. GUIDE FOR PRIVATE VSAT

1. DETAILS OF THE OPERATOR

Provide in detail the following information:

i. Foreign Hub Operator Name
ii. Foreign Hub Operator Country
iii. Does the foreign hub operator utilize the services of a satellite operator holding a CA Landing Rights Authorization (LRA)?
iv. Number of VSAT Terminals to be Operated
v. Purpose of VSAT Connectivity

2. VSAT TERMINAL REGISTER

Provide a register of the VSAT terminals indicating the Terminal ID / Serial Number, Installation Site (GPS/Address)

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APPLICATION FORM FOR POSTAL, COURIER AND TELECOMMUNICATIONS LICENCES

VIII. GUIDE FOR POSTAL AND COURIER SERVICES (PPO, IPO, NPO, CHSP)

1. LICENCE CATEGORY (SERVICES)

Indicate the Licence Category Applied For

2. SERVICE DESCRIPTION

Provide a detailed Description of Services to be Provided, Target Market / Customer Segment, Areas of Coverage of Services/Routes and the mode of providing the same services e.g. vans, trucks, motorcycles etc., Estimated Subscriber / Customer Numbers for Year 1/2/3, Projected Annual Gross Turnover at Year 1/2/3 and the funding sources.

3. DESCRIPTION OF EXPECTED QUALITY OF SERVICE

Provide a clear statement indicating whether the firm intends to install a track and trace service, and if so, briefly describe the system's operation, including how items will be tracked from collection to delivery and how customers will access tracking information; outline the projected delivery standards by specifying the expected number of days and percentage performance targets; What are your projected delivery standards?

4. PARTICULARS OF PREMISES - SECURITY OF MAILS/ITEMS AND STORAGE

Give a brief description of how mails and items are received at a designated area and handled by authorized staff. Basic security measures such as restricted access, CCTV, or security personnel are in place, and all items are recorded in a register or tracking system. The items are stored in secure locations such as lockable cabinets, shelves, or a designated storage room, with special care given to sensitive or valuable items. Overall, the security and storage arrangements are adequate to ensure safety and proper handling.