Fixed-Link Details (Form 1)

(A) LICENSEE					
Name of Licensee Do you know the ACMA Client Number?					
Yes (please specify here)					
	No (use Form 4 to supply full licensee details)				
(B) LINK DETAILS					
Your Link Ref Number (if any)					
	Site A		Site B		
Site Name (your name for the site)					
Site ACMA ID * (or use Form 3 to supply details)					
Transmitter Power & Units (include any fixed attenuation)					
Fixed Losses (dB) (estimate feeder, circ, filter losses etc)	TX	RX	TX	RX	
Antenna Type (manufacturer and model)					
Antenna Height (m) (above ground level)					
Equipment Type ** (manufacturer, model and configuration)					
Capacity (eg 8E1 or 16 Mbps)					
Modulation (eg QPSK or 128QAM)					
Emission Code (if known)					
 If you specify an ACMA ID for the site w	known you will need to fill in a separat	te Radiocommunications Site Details f	ot need to supply any additional inford form (Form 3) to provide the complete	mation about the sites. details.	
(D) SPECTRUM REQUIREMENTS					
		te A	Sit	e B	
Band (eg. 15 GHz)	5.15 /1				
Channel Width (eg. 14 MHz)					
Tx Frequency (MHz) (ONLY specify if necessary)					
Polarisation (ONLY specify if necessary)					
(E) COMMENTS					
(

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