TELECOMMUNICATIONS AUTHORITY OF FIJI

Level 1, 76 Gordon Street, Suva.

G.P.O Box 13413, Suva, Fiji Island

Phone: (679) 3310105 Fax: (679) 3310110 www.taf.org.fj email: contact@taf.org.fj

Application Form for Import Permit

TAF 2000

Name of Applicant Please provide personal details. Title (Mr/Mrs/Ms/Miss): Given Name: Last Name: Contact Details: Telephone / Mobile No: Fax No: Email Address: Registered Address Please provide individual or company name and location. Business Registration Number If applicable Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items (The following details are required for	g Applicant
Title (Mr/Mrs/Ms/Miss): Given Name: Last Name: Telephone / Mobile No: Fax No: Email Address: Registered Address Please provide individual or company name and location. Business Registration Number If applicable Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Given Name: Last Name: Contact Details: Telephone / Mobile No: Fax No: Email Address: Please provide individual or company name and location. Business Registration Number If applicable Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Contact Details: Telephone / Mobile No: Fax No: Email Address: Please provide individual or company name and location. Business Registration Number If applicable Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Fax No: Email Address: Please provide individual or company name and location. Business Registration Number If applicable Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Email Address: Please provide individual or company name and location. Business Registration Number If applicable Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Registered Address Please provide individual or company name and location. Business Registration Number If applicable Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
company name and location. Business Registration Number If applicable Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Business Registration Number If applicable Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Description of item(s) Please provide details of imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
imported item(s). Mobile phones, Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
Radio communication devices etc. Particulars of imported items Brand & Quantity of items	
etc. Particulars of imported items Brand & Quantity of items	
6 Particulars of imported items Brand & Quantity of items	
(The following details are required for	
import permit process)	
Model Number	
Serial Number of IMEI number(
for GSM mobile phones)	
Quantity of respective models	
Payment of application fee Details of receipt and amount	
Signed with signatory's name Enter details	
and position	
Date of Application Enter date	

Note that \$10.90 for each model number and payable by cash to: Telecommunication Authority of Fiji, 76 Gordon Street, Suva;

Or by TMO from All Post Office outlets to: **GOVERNMENT BUILDING POST OFFICE ONLY.**After sending the money please fax the TMO receipt and the filled Application form to fax number +679 3310110 or emailing the scanned TMO copy to tafengineering@taf.org.fi