



**SUBSCRIBER TELEVISION APPLICATION
TECHNICAL EVALUATION CHECKLIST**

1. Please ensure that this checklist is completed and returned with the application form.
2. Minimum quantities and requirements as per the applications, are to be checked (√) in column **1**. On the check list, actual amounts are to be placed in column **2 (Actual)**.

ELIGIBILITY

3. Test of eligibility will be based on satisfying required criteria as per the regulations. Please ensure that the information provided conforms to standards set in the regulations. Applicants must show that they have:
 - a. the staff to provide the necessary technical and maintenance service required by the system.
 - b. Head-end site plan and Block and Signal Level Diagram.
 - c. Equipment of the appropriate standard and quality.
 - d. The ability to do performance tests as required by the regulations.
4. Exceeding the criteria will not have a bearing on the initial eligibility but will have a bearing on the comparative review. Please ensure that the plan produced can be executed in all its technical and maintenance aspects.

Plans are to show the capability/ logistics to respond to correction of faults within thirty- six (36) hours.

COMPARATIVE REVIEW

5. Comparative review will take place between applicants where there is in excess of two applicants per area (cable), or in excess of one applicant for *wireless* (MMDS) and two applicants for *wireless* (LMDS), which satisfy the test eligibility.

CHECKLIST

	1 Eligibility Check (√)	2 Actual No.	Office use only remarks
1. PERSONNEL			
a. Permanent			
i. Technicians			
ii. Certified Technicians			
iii. Engineers			
iv. Pole line qualified person			
b. Contracted			
i. Technicians			
ii. Certified Technicians			
iii. Engineers			
iv. Pole line qualified person			
2. TEST EQUIPMENT			
a. Cable			
i. Signal Level Meter			
ii. Leakage Detector			
b. Wireless			
i. Spectrum Analyzer			
c. Other			
3. CARRIER TO NOISE (30dbc)			
4. SERVICE INFORMATION SUBMITTED			
a. Zone Layout			
b. Schematic Block and Signal level Diagram			
c. Schematic Layout Head-end site			
d. Location of masts (<i>Wireless only</i>)			
e. Telecommunications facility			
5. SYSTEM INFORMATION SUBMITTED			
a. Central receiver equipment			
b. Distribution equipment			
c. Customer Receiver equipment			
6. TRUNK CABLE (12.5mm-min)			
7. STANDBY POWER (3 hours continuous running without degradation)			
8. SERVICE VEHICLE(S)			
9. ADULT PROGRAMME EQUIPMENT Parental Lockout Devices (where applicable)			

Applicant's Name: _____

Signed: _____

Seal/Stamp: