

INFORMATION AND COMMUNICATION TECHNOLOGIES AUTHORITY (ICTA)

Level 12, The Celicourt 6, Sir Celicourt Antelme Street Port Louis Mauritius Tel.: (230) 211 5333/4 Fax: (230) 211 9444 email: icta@intnet.mu

APPLICATION FORM FOR SIGNALLING POINT CODE (SPC)

Please complete in BLOCK letters.

Application made on behalf of a body corporate should be signed by a person duly authorised by the body corporate.

Please note that one application form should be used per signalling point code applied for.

1. Particulars of applicant

 Name of operator/service provider:		
3. (a) Correspondence address	(b) Registered business address(if different)	
4. (a) Type of licence under which application is made:		
(b) Licence No:		
5. (a) Contact Person:		
(b) Telephone No:	(c) Fax No:	
(d) Email:		

2. Code applied for	
□ ISPC(INat)	\Box NSPC (NAT0)
	\Box NSPC (NAT1)

3. Nature of use of SP in the Network (tick one or more functions)

- □ Signalling Transfer Point (STP,Q.704)
- □ Signalling End Point, signalling point without STP function (SEP, Q.700)
- □ Signalling Connection Control Part Relay (SCCP relay Q.714)
- □ International Switching Centre (ISC)
- Gateway Mobile Switching Centre (GMSC)
- □ Location Register (LR)
- □ Operation and Maintenance Centre (OMC)
- □ Service Control Point (SCP)
- \Box Service Switching Point (SSP)

4. Signalling Point Details
1. Physical address of the Signalling Point
2. Signalling Point manufacturer/type
3. Proposed in-service date of Signalling Point

5. Identification of at least one planned Message Transfer Part (MTP) signalling relation	
1. Name and address of distant Signalling Point	
2. Location of distant Signalling Point	
3. SPC of distant Signalling Point (NSPC/ISPC)	

Please attach a schematic of the SS7 network set-up showing the types and interconnection with local and overseas carriers, as appropriate.

6. Declaration

I certify that the information provided in this application is true and correct and I agree to comply with any terms, conditions or restrictions which the Information and Communication Technologies Authority may impose and to be bound by the laws and regulations in force.

Company's Stamp

Applicant's signature:
Signatory's name:
Date:

For Office Use	
Special Comments:	
Date Approved	
	Signature: For Director of Engineering/Licensing
(In	formation & Communication Technologies Authority)