

**STATE OF VERMONT  
PUBLIC SERVICE BOARD**

**COMMERCIAL MOBILE RADIO SERVICE PROVIDER  
REGISTRATION FORM**

In completing the registration form, applicants shall provide the following information:

1. Name, as registered with the Vermont Secretary of State \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. All names under which Company is conducting business in Vermont \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Applicant's principle business address, telephone number, and e-mail address

\_\_\_\_\_  
Address  
\_\_\_\_\_  
City or town State ZIP Code  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone number e-mail address

4. Contact person for this application, address, telephone number, and email address

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City or town State ZIP Code  
\_\_\_\_\_

5. Name, address, and telephone number of person to receive annual report forms, if different than given in the response to item four

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Name

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Address

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City or town	State	ZIP Code
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Telephone number

6. Name, address and telephone number of registered agent in Vermont

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Name

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Address

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City or town	State	ZIP Code
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Telephone number

7. A brief description of proposed Vermont operations and services \_\_\_\_\_

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8. List the names and business addresses of current directors and officers.

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Name and Position

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Address

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City or town	State	ZIP Code
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Name and Position

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Address

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City or town	State	ZIP Code
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Name and Position

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Address

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City or town	State	ZIP Code
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9. For changes in controlling interest as defined in 30 V.S.A. §107, on an attached sheet, describe the changes in ownership.

10. For the issuance of bonds, securities or other evidences of indebtedness as defined in 30 V.S.A. §108, on an attached sheet, describe in detail each proposed transaction.

11. For sales and leases as defined in 30 V.S.A. §109, on an attached sheet, describe the changes in ownership.

**Attestation**

*The undersigned attests that he/she has examined the foregoing information provided by*

\_\_\_\_\_ *and that the information is correct and complete.*

BY: \_\_\_\_\_  
[Officer] of Company or Designated Agent

*This document was signed in my presence on the \_\_\_\_\_ day of*

\_\_\_\_\_, 2001.

\_\_\_\_\_  
*Notary Public*