

Notification form for registration of:

- Providers of electronic communications network used for providing public electronic communication services,
- Providers of public telephone services
- Providers of transmission capacity

The duty to register is according to the [Electronic Communications Regulation](#) of 16 February 2004 section 1-2, which is pursuant to the [Electronic Communications Act](#) of 4 July 2003 No. 83 section 2-1.

Please use the last page or separate documents if the allocated space in this form is not sufficient.

According to the Electronic Communications Regulation section 1-2, paragraph 4, operations in accordance with the information given in this form, may commence when the form is sent to the Norwegian Communications Authority and the obligations set down in the Electronic Communications Act and relevant regulations are fulfilled.

Please note that the main official language in Norway is Norwegian. All letters, decisions, public consultations etc. from Nkom will be in Norwegian.

PROVIDERS CONTACT INFORMATION

Name of the provider *	Norwegian company registration number *
Contact person *	Telephone *
Postal address *	Telefax
City number and city *	Email *
Visit address *	
Web site	

Note: when doing business in Norway, you will need a Norwegian company registration number ("Organisasjonsnummer") or a Norwegian-registered Foreign Enterprise number ("NUF-number"). Please consult [this](#) page for further information.

* Mandatory fields

GENERAL QUESTIONS TO PROVIDERS

1. Will you provide systems, operations or offers, of access to electronic communications <i>networks</i> used for offering public electronic communication services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If yes, please answer questions 5-7 below.</i>	
2. Will you provide public telephone services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If yes, please answer questions 8-9 below.</i>	
3. Will you provide transmission capacity (leased lines)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If yes, please answer question 10 below.</i>	
4. Will you resell electronic communication services to end users based upon an agreement with- and access to the network of a network operator?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, which network operator?	

IF YOU HAVE ANSWERED YES TO QUESTION 1

5. Please describe the actual and planned geographical extent of the electronic communications network (which counties (cities)?)	
6. Will the network be build or operated by several entities?)	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide Nkom the name of these entities:	
7. Please provide a description of what kind of public electronic communications service that will be provided in the network:	

IF YOU HAVE ANSWERED YES TO QUESTION 2

8. Please state what kind of public telephone services will be provided, e.g. fixed telephony, fixed or nomadic VoIP-telephony or mobile telephony etc.:

9. Will the public telephone service be provided in cooperation with other providers?

Yes No

If yes, please provide Nkom with the name of the partner(s):

IF YOU HAVE ANSWERED YES TO QUESTION 3

10. Will transmission capacity be provided in cooperation with other providers?

Yes No

If yes, please provide Nkom with the name of the partner(s):

PROVIDER'S SIGNATURE

I hereby confirm knowledge to the provisions in the relevant laws and regulations applicable for electronic communication networks and services, and that all information given in this form is correct.

I am aware that the company I represent may be responsible for fees in accordance to regulation on fees to the Norwegian Communications Authority, [forskrift om sektoravgift og gebyr til Nasjonal kommunikasjonsmyndighet](#).

Date

Place

Signature

(Repeat signature with capital letters)

Any changes in the information above shall immediately be reported to Nkom.

ANNEX

The information in this form is given as a change og supplement to a previous registration.