

# ORWG Station Authorization Request

Requestor				
Last Name	First Name	Grade	CAPID	Unit Charter No. <span style="color: blue;">PCR-OR-</span>
Email			Cell Phone	
Address				
City			State	Zip Code
Station Information – Check all that apply				
<input type="checkbox"/> Base <input type="checkbox"/> Mobile <input type="checkbox"/> ReadyOp		<b>Base Station Location – if different from above</b>		
Latitude (dd mm.m)		Address		
Longitude (dd mm.m)		City	State	Zip Code
Antenna Type <input type="checkbox"/> Collinear <input type="checkbox"/> Whip <input type="checkbox"/> Dipole <input type="checkbox"/> Dipole Array  <input type="checkbox"/> Beam <input type="checkbox"/> Other		Antenna DB gain	Altitude ASL	Antenna Height AGL
Operational Frequency Bands and Modes - <b>check all that apply</b>				
<input type="checkbox"/> VHF <input type="checkbox"/> FM <input type="checkbox"/> VHF AM (air band) <input type="checkbox"/> HF SSB <input type="checkbox"/> HF Digital <input type="checkbox"/> Training ELT				
FAA Coordination (Not required for mobile or ReadyOp authorizations)				
a. Will the Antenna be over 500 feet above the ground		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
b. If the antenna is within 3 NM of an airport (border) will the antenna be at or above 200 feet above the airport elevation		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
<i>Note: If you have answered YES to either a or b above, FAA coordination will be required</i>				
Federal Lands Coordination (If antenna is located on Federal Lands) (Fixed base only)				
Agency Name				
Federal installation Frequency Manager's Name				
Approvals				
Date of Request	Requestor Signature	Unit Approval Signature	Date Approved	
ORWG Approval				
ORWG Approval Name	ORWG Approved Signature	Call Sign	Date Approved	