

# NEW MEXICO FREQUENCY COORDINATION FORM 1

For Amateur Radio Stations at Fixed Sites in Auxiliary or Repeater Operation

Use this form for new applications or to update technical data for frequencies already coordinated. This form should include information about all receivers and transmitters operated by one trustee at one specific fixed site in the state of NM. This includes all repeater and auxiliary operations at the site. If more than one receiver and one transmitter are in operation at this site, attach enough Supplementary Data Sheets (Form 2) to cover all equipment and frequencies. The receive and transmit frequencies listed on each sheet (either this form or Supplementary Data Sheet) should be grouped in logical pairs based on the application checked for that sheet. For instance, repeater input/output, link input/output, repeater input/link output (for remote receiver sites) form logical pairing of frequencies. If split site operations are involved, a separate Form 1 (and Form 2, if needed) should be completed for each site. Fill out the forms completely. Incomplete forms will require the coordinator to obtain the missing information and will cause delays in approval. The trustee should not make any financial commitment that might be affected by the failure of the Committee to approve the application. Applications are considered on a first-come, first-served basis; there may be other applications for the frequencies you are requesting. No frequencies will be considered coordinated without a signed, approved application form on file with the Secretary

Send the completed application and #10 SASE to: **Neil Addis, W7FED, 8401 Disney PL NE, Albuquerque NM 87122-2789**

This is a New Application  or Update  Or email to **w7fed@protonmail.com** in .pdf format

I. INFORMATION ABOUT THE TRUSTEE:			
Name: _____	Call: _____	Home Phone _____	Work Phone _____
Address _____	email _____		
City _____	State _____	ZIP _____	

II. INFORMATION ABOUT THE OWNER/SPONSOR:			
Name/Organization _____	Point of Contact _____		
Address _____	Home Phone _____	Work Phone _____	
City _____	State _____	ZIP _____	
email _____			

III. SITE DATA: The following site data applies to the frequencies listed on this sheet and all attached Supplementary Data Sheets (Form 2).			
Town/City _____	Elevation (ASL, ft) _____	HAAT (ft) _____	
Mountain Name _____	Latitude _____	Longitude _____	
<b>Elevation</b> is at the base of the tower. For Lat/Lon please use <b>WGS-84</b> datum. See Height Above Average Terrain calculator to determine <b>HAAT</b> .			
Site Power is: Commercial <input type="checkbox"/> Solar <input type="checkbox"/> Wind <input type="checkbox"/> Emergency Power is: (Solar, Wind, Gen, Battery, etc) _____			

IV. For the receive/transmit frequencies listed below, check the one description that best describes how these frequencies are used:			
Common Site Full Duplex Repeater <input type="checkbox"/>	Control Receiver input <input type="checkbox"/>	Transmitter end of a split repeater site <input type="checkbox"/>	
Operation of a Remote Base <input type="checkbox"/>	Remote/auxiliary input receiver site for a repeater <input type="checkbox"/>	Receiver end of a split repeater site <input type="checkbox"/>	
Linking of a repeater at this site to another fixed site <input type="checkbox"/> ; Linked frequency _____			

V. Information about the Transmitter at this site:			
Frequency _____	Emission _____	CTCSS _____	CC/DCS/DSQ/NAC/RAN _____
Antenna Height above ground, in feet, at center of vertical axis _____	Repeater Call _____		
Antenna Polarization (V, H) _____	Antenna Pattern (Omni, Directional) _____	Antenna Bearing _____	
Gain (dBd) _____	Output Power (W) at TX terminals _____	Effective Radiated Power (ERP) _____	

VI. Information about the Receiver at this site:			
Frequency _____	Emission _____	CTCSS _____	CC/DCS/DSQ/NAC/RAN _____

VII. NOTES AND SPECIAL FEATURES: Check all that apply. Open System <input type="checkbox"/> Remote Base <input type="checkbox"/> Linked or cross band system <input type="checkbox"/>										
RACES Affiliated <input type="checkbox"/> ARES affiliated <input type="checkbox"/> Weather net/weather usage <input type="checkbox"/> Portable system <input type="checkbox"/>										
MODE: FM Wide	FM NARROW	D Star DV	D Star DD	DMR	Fusion	P25-1	P25-2	NXDN	ATV	DATV

VIII. Link information (for Point-to-Point Applications): All transmitters and protected receivers must be coordinated, except Remote Bases.	
Location of other end of link: _____	Call: _____
Other end previously coordinated (Y/N): _____ (Previously coordinated Hub sites do not need to be re-submitted.)	

IX. For Remote Base applications: Frequency of Remote Base _____ Output power (W) _____	
Note that Remote Base frequencies are not to be considered as coordinated but noted for database and Directory use only.	

Trustee's Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR NMFCC USE ONLY**  
APPROVED  NOT APPROVED  REASON \_\_\_\_\_

Coordinator \_\_\_\_\_ Date \_\_\_\_\_