

# Metropolitan Coordination Association, Inc. – MetroCor

305-12 Knickerbocker Avenue Bohemia, NY 11716

## Instructions for Repeater Frequencies Coordination Application / Renewal

### Information Current and Complete

Information filed with MetroCor must be kept current and complete.

### Membership Fee and Coordination Fees

The yearly dues fee for **MetroCor Membership** is \$20.00 per year per Sponsor/Club/Organization. This fee does not include Coordination Fees.

**Coordination Fees** are \$15.00 for the PRIMARY Coordination with \$5.00 for each Additional Coordination. These fees are assessed by the Sponsor/Club/Organization Mailing Address. This fee does not include MetroCor Membership Fees (dues).

There is a **Special First Year Rate** for Membership and Coordination that is \$15.00 for the PRIMARY Coordination and \$5.00 for 1<sup>st</sup> year membership for \$20.00, with \$5.00 for each Additional Coordination. For more information on MetroCor Membership Fees see the Bylaws.

### For Assistance

For Assistance with this application, please send an email to [metrocor@metrocor.net](mailto:metrocor@metrocor.net) or send correspondence to: MetroCor, 305-12 Knickerbocker Avenue Bohemia, NY 11716

## General Emitter Sponsor Information

**ITEM 1: Sponsored by** Check Box if sponsored by Individual or club/group/association Enter approximate amount of users/members of system.

**ITEM 2: Transmitter Callsign** Transmitter (Emitter) Callsign (Make sure to submit copy of FCC license for callsign with paperwork)

**ITEM 3: Expiration Date** Sponsor Callsign Expiration Date Format of response: MM/DD/YY

**ITEM 4: Issue Coordination to** Name of individual who is Trustee or Name of Sponsor, Club or Organization Name Format of response: Full name

**ITEM 5: Callsign** Callsign of Person/Entity Issued Coordination (Make sure to submit copy of FCC license for callsign with paperwork)

**ITEM 6: Sponsor Name** Full name of Sponsor, Club or Organization Name

**ITEM 7: Sponsor Name Abbreviation** Abbreviated name of Sponsor, Club or Organization Name (Suggest 10 Characters Long)

**ITEM 8: Address** Address of Sponsor, Club or Organization

**ITEM 9: City** City of Sponsor, Club or Organization

**ITEM 10: State** State of Sponsor, Club or Organization Name (2 Character Postal State Code)

**ITEM 11: Zip** Zip Code of Sponsor, Club or Organization

**ITEM 12: Web Page URL to display in MetroCor Repeater Directory** InterNet URL of Web Site for Group or Individual sponsoring repeater.

## Application Processing Information

**ITEM 13: Application Processing Information** Check the box for the type of application is being completed. NEW, RENEW, MODIFY, Request info.

## Repeater Frequency

**ITEM 14: Input (RX) Frequency** Enter Receive Frequency of Repeater in Megahertz.

**ITEM 15: Output (TX) Frequency** Enter Transmit Frequency of Repeater in Megahertz

**ITEM 16: PL/DPL Code** Enter PL or DPL code being used by Repeater, if any.

**ITEM 17: PL/DPL Frequency** Enter Frequency PL or DPL being used by Repeater, if any in hertz.

**ITEM 18: Control Frequency** Enter Repeater Control Frequency of Repeater, if any in Megahertz.

**ITEM 19: Control Frequency PL/DPL** Enter Frequency of PL or DPL being used by Repeater Control Frequency, if any in hertz.

## Geographic Information for Repeater Transmitter Site

**ITEM 20: Same / Split Site Repeater System** Check the appropriate box as to type of system (Same Site – Single antenna or Split Site – Multiple Antennas)

**ITEM 21: Facility** Enter the name of the Facility or location where the emitter is. I.e.: County Hospital Complex 13<sup>th</sup> Flr.; Babylon Town Hall Tower

**ITEM 22: ASRN Antenna Structure Registration Number** A few years ago, the FCC started to require registration of towers/structures. Each tower/structure was given an "Antenna Structure Registration Number". This number must be posted at every antenna site and can be identified on the FCC's web site. It will be a source of accurate geographic coordinates and will be invaluable for identifying multiple systems at the same site.

**ITEM 23: Address** Full Mailing Address for location where transmitter is.

**ITEM 24: City** City/Town for location where transmitter is.

**ITEM 25: County** County for location where transmitter is.

**ITEM 26: State** State for location where transmitter is. Format of response: 2 Letter State Abbreviation

**ITEM 27: Location Name to List in Repeater Directory (14 Character Max.)** Abbreviation of location of emitter.  
Format of response: 14 characters total including spaces i.e.: W. Suffolk

**ITEM 28: Base Ground Elevation (HASL-Height Above Sea Level)** Height the base of the support structure is above sea level. Format of Response: in feet

**ITEM 29: Antenna Height Above Ground (HAGL)** Height the antenna is mounted above the base of the support structure. Format of response: in feet

**ITEM 30: Height Above Average Terrain (HAAT)** Height of the antenna above trees and/or local buildings around the antenna installation. Format of response: in feet

**ITEM 31: Latitude** Transmitter Antenna Latitude Format of response: Degrees(°), minutes('), seconds("")

**ITEM 32: Longitude** Transmitter Antenna Longitude Format of response: Degrees(°), minutes('), seconds("")

**ITEM 33: Geodetic Datum WGS84 NAD83 NAD27 Other:** Format of response: Check or circle which was used for Lat and Lon. If other write in answer.

## **Geographic Information for Repeater Receiver Site**

**ITEM 34: Facility** Enter the name of the Facility or location where the Repeater Receiver is. I.e.: County Hospital Complex 13<sup>th</sup> Flr.; Babylon Town Hall Tower

**ITEM 35: ASRN Antenna Structure Registration Number** A few years ago, the FCC started to require registration of towers/structures. Each tower/structure was given an "Antenna Structure Registration Number". This number must be posted at every antenna site and can be identified on the FCC's web site. It will be a source of accurate geographic coordinates and will be invaluable for identifying multiple systems at the same site.

**ITEM 36: Address** Full Mailing Address for location where Repeater Receiver is.

**ITEM 37: City** City/Town for location where Repeater Receiver is.

**ITEM 38: County** County for location where Repeater Receiver is.

**ITEM 39: State** State for location where Repeater Receiver is. Format of response: 2 Letter State Abbreviation

**ITEM 40: Location Name to List in Repeater Directory (14 Character Max.)** Abbreviation of location of Repeater Receiver.  
Format of response: 14 characters total including spaces i.e.: W. Suffolk

**ITEM 41: Base Ground Elevation (HASL-Height Above Sea Level)** Height the base of the support structure is above sea level. Format of Response: in feet

**ITEM 42: Antenna Height Above Ground (HAGL)** Height the antenna is mounted above the base of the support structure. Format of response: in feet

**ITEM 43: Height Above Average Terrain (HAAT)** Height of the antenna above trees and/or local buildings around the antenna installation. Format of response: in feet

**ITEM 44: Latitude** Repeater Receiver Antenna Latitude Format of response: Degrees(°), minutes('), seconds("")

**ITEM 45: Longitude** Repeater Receiver Antenna Longitude Format of response: Degrees(°), minutes('), seconds("")

**ITEM 46: Geodetic Datum WGS84 NAD83 NAD27 Other:** Format of response: Check or circle which was used for Lat and Lon. If other write in answer.

## **Transmitter Power**

**ITEM 47: Transmitter Power Output** Output Power of Transmitter's Final stage. Format of response: Watts

**ITEM 48: Antenna System Loss** Amount of losses due to duplexers, Feedline, etc. Format of response: dB

**ITEM 49: Maximum Antenna Gain at Horizon** Max Gain of Antenna as per manufacturer specifications. Format of response: dB

**ITEM 50: Effective Isotropic Radiated Power** The Estimated Radiated Power of the Transmitter's Item 38 minus Item 39 plus Item 40. Format of response: Watts

## **Antenna Radiation Pattern**

**ITEM 51: Omnidirectional – Top Mounted** Orientation of Antenna if it is top mounted and Omnidirectional check box

**ITEM 52: Omnidirectional – Side Mounted** Orientation of Antenna if it is side mounted and Omnidirectional check box and enter the requested information about favored and shadowed direction.

**ITEM 53: Elliptical/Bi-Directional** Orientation of Antenna if it is Elliptical/Bi-directional check box and enter the requested information about Major Lobe Axis in degrees, its –3 db Beamwidth in degrees, and its Front to Side Ratio in dBs.

**ITEM 54: Cardioid/Unidirectional** Orientation of Antenna if it is Cardioid/Uni-directional check box and enter the requested information about Major Lobe Axis in degrees, its -3 db Beamwidth in degrees, and its Front to Side Ratio in dBs.

**ITEM 55: Antenna Polarization** Check the appropriate box (Vertical, Horizontal, Circular/Elliptical)

## **Repeater Operating Parameters and Special Features**

**ITEM 56: Repeater Usage** Open System or Closed, Limited Access System? Check the appropriate box: Open/Closed (only one)

**ITEM 57: Bi-Lingual Repeater** Check the appropriate box: Yes/No (only one)

**ITEM 58: Experimental** Demonstration or Experimental System? Check the appropriate box: Yes/No (only one)

**ITEM 59: Long-Tone Zero (LITZ) Support** Check the appropriate box: Yes/No (only one)

**ITEM 60: Tone CTCSS** Tone Access (CTCSS) Required? Check the appropriate box: Yes/No (only one)

**ITEM 61: CTCSS IN** Input CTCSS Tone – Motorola Designator or Hz

**ITEM 62: CTCSS OUT** Output CTCSS Tone – Motorola Designator or Hz

**ITEM 63: DCS Access** Digital-Coded Squelch System? Check the appropriate box: Yes/No (only one)

**ITEM 64: DCS Code** Enter DCS Access Code

**ITEM 65: DTMF Access** Check the appropriate box: Yes/No (only one)

**ITEM 66: DTMF Code** Enter DTMF Access Code

**ITEM 67: Remote Base(s)** Remote Base System? Check the appropriate box (only one)

**ITEM 68: SNP Shared Not Protected** Is this Frequency Pair Shared and Not Protected? Check the appropriate box (only one)

**ITEM 69: Autopatch** Check the appropriate box: Yes/No (only one)

**ITEM 70: Patch Sequence** Enter Autopatch DTMF Access Code

**ITEM 71: Closed Patch** Is Autopatch Closed? Check the appropriate box: Yes/No (only one)

**ITEM 72: Emerg Power** Do System Have Emergency Backup Power? Check the appropriate box: Yes/No (only one)

**ITEM 73: Emerg Sun** Do System Have Emergency Backup Solar Power? Check the appropriate box: Yes/No (only one)

**ITEM 74: Emerg Wind** Do System Have Emergency Backup Wind Driven Power? Check the appropriate box: Yes/No (only one)

**ITEM 75: Linked System** Is System Linked With Another System? Check the appropriate box: Yes/No (only one)

**ITEM 76: Linked Frequency** Enter Link Frequency

**ITEM 77: Portable System** Is System a Portable System? Check the appropriate box: Yes/No (only one)

**ITEM 78: RACES Affiliated** Is System RACES Affiliated? Check the appropriate box: Yes/No (only one)

**ITEM 79: ARES Affiliated** Is System ARES Affiliated? Check the appropriate box: Yes/No (only one)

**ITEM 80: Access to Law Enforcement** Does System Have Direct Access to Law Enforcement? Check the appropriate box: Yes/No (only one)

**ITEM 81: Law DTMF** Enter DTMF Sequence to access Law Enforcement

**ITEM 82: Weather Net** Does System have Weather Net or usage? Check the appropriate box: Yes/No (only one)

**ITEM 83: Weather DTMF** Enter DTMF Sequence to access Weather

## **Repeater Hardware**

**ITEM 84: Repeater Transmitter** Make and Model of equipment used

**ITEM 85: Repeater Power Amplifier** Make and Model of equipment used

**ITEM 86: Transit Antenna** Make and Model of equipment used

**ITEM 87: Repeater Controller** Make and Model of equipment used

**ITEM 88: Duplexing/Combining Equipment** Make and Model of equipment used

**ITEM 89: Remote Base Hardware/Antennas** Make and Model of equipment used

**ITEM 90: Link Hardware/Antennas** Make and Model of equipment used

**ITEM 91: Repeater Receiver** Make and Model of equipment used

**ITEM 92: Repeater Preamplifier** Make and Model of equipment used

**ITEM 93: Receive Antenna** Make and Model of equipment used

**ITEM 94: Feedline** Make and Model of equipment used

## **Primary Contact**

**ITEM 95: Name** Primary Contact's Full Name Format of Response: First Name MI Last Name Suffix if any

**ITEM 96: Position** Primary Contact's Position in Organization Check appropriate box or fill in Other

**ITEM 97: Callsign** Primary Contact's Callsign (Make sure to submit copy of FCC license for callsign with paperwork)

**ITEM 98: Class** Primary Contact's License Class Format of response: (Tech, Gen, Adv, Ext, Club)

**ITEM 99: Expiration Date** Primary Contact's Callsign Expiration Date Format of response: MM/DD/YY

**ITEM 100: Address** Primary Contact's Full Mailing Address

**ITEM 101: City** Primary Contact's City/Town

**ITEM 102: State** Primary Contact's State Format of response: 2 Letter State Abbreviation

**ITEM 103: Zip** Primary Contact's Zip Code Format of response: 5 by 4 if available i.e.: 11704-2606

**ITEM 104: Home Phone** Primary Contact's Home Phone Number Format of response: (Area Code) 555-1234

**ITEM 105: Work Phone** Primary Contact's Work Phone Number Format of response: (Area Code) 555-1234 ext.

**ITEM 106: Fax** Primary Contact's Work Phone Number Format of response: (Area Code) 555-1234

**ITEM 107: Email Address** Primary Contact's Internet Email Address

**ITEM 108: Pager** Primary Contact's Pager Number Format of response: (Area Code) 555-1234 pin #

**ITEM 109: Mobile Phone** Primary Contact's Mobile/Cell Phone Number Format of response: (Area Code) 555-1234

**ITEM 110: Packet Address** Primary Contact's Packet Address

## **Secondary Contact**

**ITEM 111: Name** Secondary Contact's Full Name Format of Response: First Name MI Last Name Suffix if any

**ITEM 112: Position** Secondary Contact's Position in Organization Check appropriate box or fill in Other

**ITEM 113: Callsign** Secondary Contact's Callsign (Make sure to submit copy of FCC license for callsign with paperwork)

**ITEM 114: Class** Secondary Contact's License Class Format of response: (Tech, Gen, Adv, Ext, Club)

**ITEM 115: Expiration Date** Secondary Contact's Callsign Expiration Date Format of response: MM/DD/YY

**ITEM 116: Address** Secondary Contact's Full Mailing Address

**ITEM 117: City** Secondary Contact's City/Town

**ITEM 118: State** Secondary Contact's State Format of response: 2 Letter State Abbreviation

**ITEM 119: Zip** Secondary Contact's Zip Code Format of response: 5 by 4 if available i.e.: 11704-2606

**ITEM 120: Home Phone** Secondary Contact's Home Phone Number Format of response: (Area Code) 555-1234

**ITEM 121: Work Phone** Secondary Contact's Work Phone Number Format of response: (Area Code) 555-1234 ext.

**ITEM 122: Fax** Secondary Contact's Work Phone Number Format of response: (Area Code) 555-1234

**ITEM 123: Email Address** Secondary Contact's Internet Email Address

**ITEM 124: Pager** Secondary Contact's Pager Number Format of response: (Area Code) 555-1234 pin #

**ITEM 125: Mobile Phone** Secondary Contact's Mobile/Cell Phone Number Format of response: (Area Code) 555-1234

**ITEM 126: Packet Address** Secondary Contact's Packet Address

**ITEM 127: Position of person completing document** Position in Organization of the person completing this document. Check appropriate box or fill in Other

**ITEM 128: Signature** Legal Signature of the individual that filled out the document to verify you have completed the document to the best of your knowledge

**ITEM 129: Callsign** Callsign of the individual that filled out the document

**ITEM 130: Date** Date the document was signed and completed being filled out.

If you have any prior documentation to confirm your responses to these items please send photo copies of the originals so we can compare these to the paperwork that has been forwarded to us.

We thank you for your time and patience as we go through this process of contacting ALL equipment owners.

Please be aware that this has been a time extensive process and we have not been able to contact every owner as quickly as we would have liked because of the limited information we were first given.

Thank you,

MetroCor