

REQUEST FOR COORDINATION – REPEATER

Upper Peninsula Amateur Radio Repeater Association

UPARRA Frequency Coordinator

Email: UPARRA@Hotmail.com

Website: <https://uparra.org>

This form must be filed within 6 months of your grant of coordination, or when your repeater is operational. This form serves one of two purposes, to state that the repeater is on the air, or to request a 6 month extension of the time to construct the repeater. If this form is not received in a timely manner by the UPARRA, the coordination may be rescinded. With the bands filling up, it is not possible to hold open coordination for a repeater that will not be built.

Request Type	
<input type="checkbox"/> On The Air	<input type="checkbox"/> 6 Month Extension
Today's DATE:	<input type="text"/>

Repeater Licensee Information	
Club/Group:	<input type="text"/>
Name:	<input type="text"/>
Callsign:	<input type="text"/>
Addr:	<input type="text"/>
City:	<input type="text"/>
State:	MICHIGAN Zip: <input type="text"/>
Email:	<input type="text"/>
Phone:	<input type="text"/>
Repeater Callsign	<input type="text"/>
Trustee:	<input type="text"/>

General Repeater Information	
Mode:	<input type="checkbox"/> FM Voice <input type="checkbox"/> Digital Voice <input type="checkbox"/> ATV <input type="checkbox"/> Other <input type="text"/>
Repeater access will be:	<input type="checkbox"/> Open <input type="checkbox"/> Closed
Access:	<input type="checkbox"/> PL/tone: <input type="text"/> <input type="checkbox"/> digital/code <input type="text"/> <input type="checkbox"/> other: <input type="text"/>
Proposed Features:	<input type="checkbox"/> (A)utopatch, open <input type="checkbox"/> (CA) Autopatch, closed <input type="checkbox"/> (E)mergency power <input type="checkbox"/> (WX) Weather nets <input type="checkbox"/> Echolink/ IRLP <input type="checkbox"/> (P)ortable <input type="checkbox"/> Other <input type="text"/>

Transmitter Information	
Transmitter Frequency:	<input type="text"/> MHz
Transmitter power output:	<input type="text"/> Watts
Effective radiated power:	<input type="text"/> Watts
Transmitter Location, in or near this city:	<input type="text"/> , MI
Transmitter Location (Degrees, Minutes, Seconds):	
Latitude:	<input type="text"/> deg <input type="text"/> min <input type="text"/> sec N
Longitude:	<input type="text"/> deg <input type="text"/> min <input type="text"/> sec W
Tower base, at ground elevation:	<input type="text"/> ft AMSL
Antenna elevation above ground:	<input type="text"/> ft
FCC tower registration number (if registered):	<input type="text"/>

Receiver Information	
Receiver Frequency:	<input type="text"/> MHz
Transmitter Location (Degrees, Minutes, Seconds):	
Latitude:	<input type="text"/> deg <input type="text"/> min <input type="text"/> sec N
Longitude:	<input type="text"/> deg <input type="text"/> min <input type="text"/> sec W

Please sign ONLY ONE of these boxes, below:

This repeater is now on the air:		
Signature: <input type="text"/>	Callsign: <input type="text"/>	Date: <input type="text"/>

I am filing for a 6 month extension to complete construction:		
Signature: <input type="text"/>	Callsign: <input type="text"/>	Date: <input type="text"/>