

Notification form

In Table 1 below, please tick only the one, out of the available options, which is applicable to your case.

Network = public electronic communications network

Service = publicly available electronic communications service

If you intend to start a whole new business and have not notified any network or service yet to the National Authority for Management and Regulation in Communications (ANCOM), please tick item 1.1 in Table 1 and then filling in Tables 2 to 4.

In case you are a provider which has already notified to ANCOM of the beginning of its activities and you wish to amend the submitted information (the provision of new networks or services, expansion or narrowing of the geographic area of network or service provision, termination of certain networks or services etc.), please notify to ANCOM only of the changes that you wish to introduce by ticking item 1.2 in Table 1 and then filling in items 2.1 and 2.2 in Table 2, as well as Table 4.

In case of termination of your whole activity, please tick item 1.2 in Table 1 and indicate the date on which the termination occurs in the attached column and then fill in items 2.1 and 2.2 in Table 2.

In Table 3, please provide the requested information about the person you would like to be the main contact for your relationship with ANCOM for any aspect regarding the notification procedure, as well as the details of an alternative contact person (to be reached in case the main contact person does not respond).

Table 1 – Purpose of the notification

This notification is for	
1.1. Commencement of new activity (provision of networks and/or services) <i>If you select this item, please proceed to filling in Tables 2 to 4.</i>	<input type="checkbox"/>
1.2. A. Changes ¹ to the networks/services already notified to ANCOM <i>If you select this item, please proceed to filling in items 2.1 and 2.2 in Table 2 and Table 4.</i> B. Termination of your whole activity <i>If you select this item, please proceed to filling in 2.1 and 2.2 in Table 2, and the termination date of your whole activity beside your tick mark.</i>	<input type="checkbox"/> <input type="checkbox"/> from (date).....
1.3. Changes to provider identification data, contact person or contact details. <i>If you select this item, please proceed to filling in Tables 2 and/or 3.</i>	<input type="checkbox"/>
1.4. Changes to the commencement date ² <i>If you select this item, please proceed to filling in items 2.1 and 2.2 in Table 2 and Table 4.</i>	<input type="checkbox"/>

¹ Changes that must be notified concern the intention to provide new networks or services, to expand or narrow the geographic area of your notified network and/or service or to terminate networks and/or services etc. (for example, tick item 1.2. if you are already notified as an internet service provider and you intend to provide also voice services or if you intend to change the geographic reach of your notified network/service).

² This change, if applicable, should be notified to ANCOM before the commencement date already notified.

Table 2 – Identification data

Details of the requester/provider	
2.1. Name of the provider	
2.2. A. Provider's legal status and organisation form ³ B. Unique identification code under which the provider is registered in the relevant register ⁴	
2.3. Geographical address of the provider's main establishment and, where applicable, of the entities without legal personality (branches, agencies, representative offices, offices etc.) registered in other Member States	
2.4. Provider's website address, where applicable, dedicated to the provision of networks or services ⁵	

Table 3 – Contact person and contact details

Contact person	
3.1. Full name of the contact person, who has the right to submit notifications or documents on provider's behalf	
3.2. Telephone no.	
3.3. E-mail address	
3.4. Geographic address ⁶	
Alternative contact person	
3.5. Full name of the alternative contact person	
3.6. Telephone no.	
3.7. E-mail address	
3.8. Geographic address ⁷	

³ For example, Ltd., JSC, sole proprietor (S.P.), Individual Enterprise, Family Enterprise, association, foundation, federation.

⁴ For example, the unique registration code in the Trade Registry, the fiscal identification code, the registration number in the Associations and Foundations Registry, in the Federations Registry or, if applicable, another equivalent identification code/number issued by authorities outside Romania.

⁵ Providers shall indicate the address of their website's sections concerning the provision of electronic communications networks or services, in case such pages are available.

⁶ Correspondence address in relation to ANCOM; optional, to be filled in only in case it is different of 2.3.

⁷ Correspondence address in relation to ANCOM; optional, to be filled in only in case it is different of 2.3.

Table 4 – Short description of the networks and services ⁸

(1) Types of networks/ Types of services <i>(Please tick)</i>	(2) Short description of the network/ Short description of the service ⁹ <input type="checkbox"/> Service resale <i>(please tick):</i>	(3) Geographic area where the network and/or the service is provided		(4) Publicly Available ^{10?}	(5) Wholesale- only service ¹¹	(6) Estimated commenceme nt date	(7) Termination date
		<i>(Please choose from the drop-down menu)</i>	Name <i>(Please indicate the name of the geographical area)</i>				
Short description of the networks							
<input type="checkbox"/> R1 Metal Line (DSL)		National Counties Cities/Town/Communes					
<input type="checkbox"/> R2 Coax (cable TV)							
<input type="checkbox"/> R3 Fibre							
<input type="checkbox"/> R4 Electricity cable system (PLC)							
<input type="checkbox"/> R5 Wireless - licensed spectrum							

⁸ Please indicate the activities to be carried out by the provider submitting the notification.

⁹ Please tick resale if service resale is intended. The resale activity involves the provider’s purchase of certain electronic communications services within the purpose of their resale to third parties, including to end-users, without the provider transforming or significantly altering the services thus purchased. In this case the subsequent resale is performed by the provider on its own behalf and account.

¹⁰ Only the offers dedicated expressly and unequivocally to a well-defined category of users are not public provision offers.

¹¹ To be tick if the provider intends to provide the service only at wholesale market, the possibility of activating on the retail market being excluded. In this case, it is not relevant if the service is provided whether via own network or based on resale.

<input type="checkbox"/> R6 Wireless - unlicensed spectrum							
<input type="checkbox"/> R7 Standard mobile network (e.g: 2G; 3G; 4G; 5G)							
<input type="checkbox"/> R8 Other mobile solutions (e.g: TETRAPOL emergency networks)							
<input type="checkbox"/> R9 Submarine cables							
<input type="checkbox"/> R10 Satellite							
<input type="checkbox"/> R11 Other types of networks							

Short description of the services

<input type="checkbox"/> S1 Fixed IAS	<input type="checkbox"/> Resale	National Counties Cities/Towns/Communes		<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S2 Mobile IAS	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S3 Fixed NB- ICS (including nomadic/location independent ones)	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		

<input type="checkbox"/> S4 S3 Mobile NB-ICS (including MVNO)	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S5 Data transmission	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S6 Leased lines	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S7 TV broadcasting	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S8 Radio broadcasting	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S9 Roaming services (MCA and MCV)	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S10 Transport of telephone traffic among operators	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> S11 M2M ¹²	<input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Other types of services	<input type="checkbox"/> Retransmission of linear audiovisual media programme services <input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/> Other types <input type="checkbox"/> Resale			<input type="checkbox"/>	<input type="checkbox"/>		

¹² Machine-to-machine (M2M) - a service involving an automated transfer of data and information between software-based devices or applications, with a limited human interaction or without human interaction at all.

Declaration ¹³

On behalf of the requester/provider, I declare that the information provided by me is accurate and complete in all respects.

Full name of the requester’s/provider’s representative:

Signature:

Position held (if the requester is a company):

Date: _____

¹³ The notification must be signed by the legal or conventional representative of the requester/provider.