

APPLICATION FORM FOR ACCESS TO VICTORY DIGITAL NETWORK PRIVATE. LIMITED.,

1. Name of the broadcaster:

2. The names of CEO/MD of the broadcaster:
3. Registered Office address:
4. Address for communication:
5. Name of the contact person/ Authorized Representative:
6. Telephone:
7. Email address:
8. Name of channel for which request for distribution has been made:
9. Copy of permission letter issued by the ministry of information and broadcasting for downlinking of the channels mentioned above in India:
10. Nature of channel (pay or free- to- air):
11. Genre of channel:
12. Language(s) of channel:
13. Downlinking parameters of the channel:
a. Name of satellite:
b. Orbital location:
c. Polarisation:
d. Downlinking frequency:
14. Modulation/coding and compression standard of channel:
15. Encryption of channel: encrypted/unencrypted
(Signature)
Date and Place:



DECLARATION		
I,	S/ o, D/o,	(Authorize
Signatory), of	(Name of the broadcas	ter), do hereby declare that
the details provided above a	re true and correct.	
(Signature)		
Date and Place:		