

Last Frontier Amateur Radio Society, Inc.

3932 Wolverine Way Unit 1
Kodiak, AK 99615
<https://lfars.net>

Amateur Radio Relicensing Affidavit

The purpose of this affidavit is to verify that the individual named herein is in fact the person who is / was the authorized holder of an expired amateur radio license issued by the U.S. Federal Communications Commission (FCC). That license has now expired, and is past the 2 year and 1 day cutoff period for automatic renewal.

Warning: All statements herein are subject to applicable Federal and State laws concerning commission of perjury, violation of which can result in significant penalties. **Attempting to obtain an amateur radio license by fraudulent means is an offense punishable by federal law.** [Reference: 47 CFR §97.17 (c)]

Statement of applicant: (Check appropriate boxes and fill in blanks as appropriate. Please print legibly)

Person making application for license: _____
Last name (please print) First name Initial

Current mailing address: _____
Address line 1 (Street name and number, or PO Box number)

_____ Address line 2 City State (2-letter) ZIP Code

License information: _____
(from expired license) Call Sign Class Privileges Issue date (if known)

Applicant contact information: _____
Primary telephone number Alternate telephone number

_____ Primary E mail address Alternate E mail address

My name and mailing address have not changed from that shown on my expired license.

My name has changed from that shown on my expired license. **My previous name was:**

_____ Last name (Please print) First name Initial

My current mailing address has changed from that shown on my expired license. My previous mailing address was:

_____ Primary street name and number, or PO Box number

_____ Address line 2 City State (2-letters) ZIP code

I attest by my signature that these facts as entered are complete and true to the best of my knowledge, and that I intend by this affidavit to affirm that I have previously held a FCC issued amateur radio license of the specified class (now expired and beyond the 2 year and 1 day limit for automatic renewal), and that I am making application for a new or upgraded license with privileges based on these same facts.

I authorize the Last Frontier Amateur Radio Society, Inc. to take whatever steps are needed to verify these facts in consideration of their filing of an application for a new amateur radio license on my behalf. I also understand that attempting to obtain an amateur radio license by fraudulent means is an offense punishable by federal law. [Reference: 47 CFR §97.17 (c)]

Signature: _____
Applicant signature (sign in ink) _____ Date signed _____

Statement of Witnesses (required only if the applicant's name and / or mailing address have changed from that shown on the original license): By your signature(s) herein, you are attesting that you do in fact know the person making application for a new or upgraded amateur radio license, and that the person is whom they claim to be, and that all facts as presented herein are complete and true to the best of your knowledge.

Witness 1: _____
Last name (please print) _____ First name _____ Initial _____ Call Sign, if licensed _____

Contact info: _____
Mailing address _____ City _____ State _____ ZIP Code _____

Telephone Number _____ Email address _____

Signature: (please sign in ink) _____
Signature of first witness _____ Date Signed _____

Witness 2: _____
Last name (please print) _____ First name _____ Initial _____ Call Sign, if licensed _____

Contact info: _____
Mailing address _____ City _____ State _____ ZIP Code _____

Telephone Number _____ Email address _____

Signature: (please sign in ink) _____
Signature of second witness _____ Date Signed _____