

SURUHANJAYA KOMUNIKASI DAN MULTIMEDIA MALAYSIA
SENARAI SEMAK DOKUMEN KEBENARAN MERANCANG : STRUKTUR
MENARA SISTEM PEMANCAR ATAS TANAH

JENIS DAN BILANGAN DOKUMEN YANG DISEMAK OLEH OSC			ADA/TIADA	CATATAN
Bil	Dokumen	Bilangan Dokumen		
1	Surat Permohonan	1		
2	Borang - "Tower/Rooftop Inspection Form"	1		
3	pelan A3 yang telah disahkan oleh Perunding Professional/Jurutera Bertauliah (Professional Engineer) dalam bidang komunikasi mengandungi:	2		
	a. Pelan Tapak Infrastruktur	1		
	b. Pelan Rekabentuk Struktur	1		
	c. Pelan lokasi	1		
4	Laporan Jurutera			
	a. Rekabentuk	1		
	b. Laporan Penyiasatan Tanah	1		
	c. Tapak Asas Menara	1		
5	Fail Digital Format .PDF - Pelan Tapak Infrastruktur	1		dalam softcopy - CD



TOWER / ROOFTOP INSPECTION CHECKLIST

Client Information	
Organisation Name :	
Station Name :	
Site Address :	
Coordinate :	Latitude : ° ' " North
	Longitude : ° ' " East
Contact Person :	Name :
	Telephone :
	Fax :
	E-mail :
System Description : (Purposes Use of System)	

Land Status		
Type	(√)	Remarks
Residential		
Commercial		
Industrial		
Others		

Tower Information	
Tower Height : (meter)	
Tower Type : (Monopole , 3 Legged , 4 Legged , Misc)	
Proximity / Distance from Existing Building : [Residential, Commercial, Industry] (meter)	
Earthing System : (Yes / No) (Remarks)	
Aviation Light : (Yes / No) (Remarks)	

Security And Safety		
Item	(Yes/No)	Remarks
Power		
Cabin		
Generator		
Housekeeping Work		
Log Book		
Door & Gate (with Lock & Key)		
Boundary with fencing		
Distance security fence from the tower (<i>meter</i>)		
"No Smoking" & "No Entry" signs		
Others :		

Operations And Maintenance		
Item	(Yes/No)	Remarks
Tower Structure		
Equipment		
Generator		
Air Conditioner		

Related Information			
Item	(Yes/No)	Remarks	
Date of Tower To be Commissioned		Date :	
Co-Location with Other Parties		Party/Operator :	-
Approval from Local Authority		Local Authority :	
		Date :	
No. of antennas to be Installed			

Signature : _____

Name :

I/C No. :

[for Malaysian Communication & Multimedia Commission]

Date :	
Time :	

Signature : _____

Name :

I/C No. :

Company Chop:
(Operator)