



Australian Government

Indigenous Communications Program

Community Phone Nomination and Agreement Form

What is on offer

Table with 2 columns: The department offers the community: and Community responsibilities:.

Indicate the community's preference for a fixed phone or satellite handset

Table with 2 columns: Fixed phone—the community receives: and Satellite handset—the community receives:.

About your community (please print)

Form with 3 rows for community details: name, alternative name, and population.

|                                                                                                                                                                                                                    |                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| Are there permanent dwellings in the community?<br>If yes, how many are there?                                                                                                                                     | Yes / No<br>Number of dwellings:                 |
| Any particular issues / circumstances within the community that we should know about—for example health or safety issues, difficulty getting to existing (closest) telephone? Please provide detailed information. | Yes / No<br>Details:                             |
| Is there a phone in the community?<br>If not, distance to nearest public access phone.                                                                                                                             | Yes / No<br>Distance:                      Town: |
| Is there reliable mobile coverage in your community?<br>If yes, how many people have mobile phones?                                                                                                                | Yes / No<br>Number of people with mobiles:       |

|                                                                                                                                                                                                                                  |                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| Indicate the community's preferred locations for a fixed phone. (Provide two sites. Take into account 24-hour accessibility and lighting).<br>Please attach a sketch or location map showing where the phone would be installed. |                                                                   |
| <b>Nominating officer</b><br>(The person who identified the community as needing a telephone.)                                                                                                                                   | Name (please print):<br><br>Phone:<br><br>Email:<br><br>Position: |

### Signatures panel

|                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Community representative</b><br>If the community's preference is for a satellite handset, please provide the name of the responsible corporate organisation and contact details for a person within that organisation. The satellite handset will be registered to the organisation. | <b>I understand the community's responsibilities for the phone and I have consulted with the community.</b><br><br>Name (please print):<br><br>Phone:<br><br>Email:<br><br>Signature:          |
| <b>Name and signature of endorsing Australian Government or state or local government official:</b>                                                                                                                                                                                     | <b>I acknowledge and confirm the need for a phone and certify the information contained in this form is correct.</b><br><br>Name (please print):<br><br>Phone:<br><br>Email:<br><br>Signature: |
| Date                                                                                                                                                                                                                                                                                    | / / 2011                                                                                                                                                                                       |