



**Communications
Commission
of Kenya**

**INSPECTION QUESTIONNAIRE FOR
NETWORK FACILITIES PROVIDER**

1. GENERAL INFORMATION

1.1 Name of Licensee: _____

License No: _____

Other Licenses held: _____

1.2 Address

Postal address: _____

Physical address: _____

1.3 Contact details

Name and title of CEO: _____.

Name and title of contact person: _____

Telephone: (a) Landline _____ (b) Mobile _____ Fax: _____

Email: _____ Web address: _____

1.4 Which areas have you covered as per the Licensed Annex.

2.0 TECHNICAL INFORMATION:

2.0 What is your Network coverage (attach details, maps etc)

2.1 What transmission systems have you deployed?

2.2 Have you type approved your equipment? If yes, attach the list.

2.3 Do you have any Numbering and Frequency spectrum resources? Give details and how much is in use to date?

2.4 Are you interconnected to any other network / service provider? If yes provide the list and services provided.

- i. . _____
 - ii. . _____
 - iii. . _____
 - iv. . _____
-

2.5 Do you provide any emergency services and connectivity to Emergency organizations? If yes, provide details.

2.6 Do you have Service Level Agreements (SLAs) with your customers? If yes, provide a copy?

2.7 What are your Universal Service Obligations? How far have you fulfilled this?

3.0 License Conditions

3.1 What is your Network Topology? Please show the diagrams.

3.2 Where is your Network Management (control) Centre – NMC and NCC located?

3.3 Do you share Telecommunications infrastructure with other users? If yes, provide details.

3.4 What are your minimum quality of service standards obligations (QoS Parameters considered)

- 1) .
 - 2) .
 - 3) .
 - 4) .
 - 5) .
-

3.5 Do you have procedures to follow in the event of a Public Emergency? Provide details.

3.6 What are your arrangements to provide access to sites and records for the CCK inspection team?

3.7 Do you have a Billing System? If yes, have you submitted it to the Commission for approval?

3.8 What are your procedures for maintaining confidentiality and privacy of proprietary information and business secrets within your systems? (attach copy)

3.9 What have you put in place to ensure Fair Trade with other licensees?

3.10 What have you put in place to ensure there is no undue preference or discrimination to persons/businesses in need of your services and support?

3.11 What have you put in place to ensure no Cross Subsidy?

3.12 What is your shareholding structure? Provide the CR 12 or equivalent.

3.13 What are your joint ventures? Did you notify the Commission before engagement?

3.14 What are your accounting principles relating to your licensed systems? Have you submitted a copy to the Commission?

3.15 Have you submitted the Compliance return forms to the Commission in the prescribed format and periods? If yes when was your last submission?

3.16 What are your procedures for settling disputes?

3.17 Have you paid your frequency, annual operating and license fees? If yes, when was your last payment? (Produce receipt).

4.0 Conclusion.

Detail any comments or suggestions on this inspection and your expectations from the commission?

.....
.....
.....

.....
.....
.....
.....
.....
.....

CCK INSPECTORS

- 1. Sign
- 2. Sign
- 3. Sign

REMARKS:

.....
.....
.....
.....
.....

Licensee Representatives:

- | | |
|--------------------|--------------------|
| 1. NAME..... | 2. NAME: |
| DESIGNATION: | DESIGNATION: |
| SIGNATURE: | SIGNATURE..... |
-