

Michigan Area Repeater Council Technical Data Sheet

Action Requested

New Coordination ___ Reassignment ___ Modify Existing Coordination ___ Renewal Update ___

System Type

___ Repeater ___ One Way Link ___ Two Way Link ___ Multi Location Link

Frequency Information

Band: _____ Output Freq.: _____ Input Freq.: _____ Control Freq.: _____

System Status

In Operation: _____ Will Be On By: _____ Not Used (return to frequency pool) _____

Sponsorship (Sponsor is the holder of the coordination)

Sponsor: _____ Trustee: _____ Station Call: _____

System Owner: _____

System Information

City Identified With System: _____
Geographic Area Served: _____
County (transmitter located): _____
Repeater Address: _____
Nearest Intersection: _____
Location Of Receiver If Different Than Above: _____
Coordinates To The Nearest Second: Latitude _____ Longitude _____
Ground Elevation Above Sea Level (AMSL): _____ Ant Height Above Ground: _____
Height Above Average Terrain (HAAT): _____
Date system was originally coordinated: ____/____/____
Michigan Coordination number: _____

Return Form To:
David G Johnson WD8DJB
2266 E Vermontville Hwy
Charlotte, MI 48813-8705

Antenna & Power Information

Antenna Gain : _____ dB Omni Or Directional : _____ Bearing Of Ant (if directional) _____
Power To Antenna: _____ Watts E.R.P. In Watts : _____

Access Mode

___ (O) Open ___ (C) Closed ___ (PL) CTCSS Freq. _____ DTMF (T) ___ Digital (Y) ___
Do you want this Repeater listed in the ARRL Directory? Yes ___ No ___
Do you want your PL Tone/DTMF Access sequence Published? Yes ___ No ___

System Features

A= Autopatch CA= Closed Patch DS= Dual Squelch E= Emergency Power L= Linked
P= Portable System PKT= Digital Packet Capability R/r = RACES A/a = ARES
X= Wide Area (requires Quadrant App) Y= RTTY/ASCII z/Z= Direct Access To Police (911) WX = Weather Net
Your Features : _____

Trustee Information

Name : _____ Callsign : _____
Address : _____ City : _____
State : _____ Zip Code : _____ Day Phone (____) _____ Night (____) _____
Email Address: _____
I want to receive the MARC Newsletter by: Email Only _____ Regular Mail only _____

I certify that I have read and agree to abide by the MARC Standards and that the statements above are true, complete and correct to the best of my knowledge and belief.

Signature: _____ **Date :** _____

INSTRUCTIONS FOR TDS

This form explains how to fill out the MARC TDS form. It does not cover every box/line. This is to be filed only by a licensed amateur radio operator. The person filling out this form should be the Trustee of the repeater. The Trustee normally is the control operator and has sole responsibility for all correspondence with the MARC. This form must be complete, and all appropriate boxes checked.

ACTION REQUESTED:

1. Check **New Coordination** for a frequency not currently assigned to you or when requesting an additional link frequency, to change location, ERP, antenna height, or any other operation that will change the technical parameters of the system. Explain the modification desired in the "Comments" area.
2. Check **Modify Existing Coordination** for a change in call sign, Trustee, access mode or system features.
3. Check **Renewal Update** when making the required two-year update of the MARC inc. files

SYSTEM TYPE: Check only one box in this section. Use an individual form for each component such as a transmitter, link, system, or remote receivers.

FREQUENCY INFORMATION:

1. For a **New Coordination**, indicate the desired band only. All other actions require entering coordinated frequency data.

SYSTEM STATUS: "Will Be On By" enter date only if the system has been off-line for some reason. "**Proposed**" is only for new coordinations. If system is coordinated and on the air use "**Operational**".

SPONSORSHIP: The sponsor is the actual holder of the coordination. Enter sponsor name, club or organization.

Trustee enter name and call sign of individual in control of the repeater.

Station Call is the call sign on the repeater ID.

SYSTEM INFORMATION:

1. **Geographic Area Served** Please use the 4 quadrant indicator NE, NW, SE, SW given I-75, US-27, & US-127 as the north/south line and 46 as the east/west line.

2. Note **Location of Receiver** if different from the transmitter location.

Coordinates provide the Latitude and Longitude to nearest second. (Required) Entries with double zeros in the seconds position are not acceptable. The AMSL and COORDINATES are derived from a USGS 7 ½ minute quadrangle map or GPS device.

Exact Location: this is the **address where the repeater is located.**

ANTENNA & POWER INFORMATION: Please note the Power to Antenna does not refer to transmit power out of the transmitter, but to the actual power that reaches the feed point of the antenna. There are significant power losses in duplexers and feed lines. Please calculate these losses.

ACCESS MODE & SYSTEM FEATURES: The letter codes next to each box indicate the coding that will appear in the repeater directory. Check boxes as they apply to your system.

TRUSTEE INFORMATION: Enter information about the person who is responsible for communicating with the MARC. This is usually the Trustee.

CERTIFICATION: *This is information about the Trustee, with whom the MARC communicates.*

DATE: Please be sure to date this form where indicated.

NOTE if this frequency had been coordinated to another individual, organization or group, a letter of reassignment from the original coordination owner **MUST** accompany this request form.