



EASTERN CARIBBEAN TELECOMMUNICATIONS AUTHORITY (ECTEL)

# Review of Annual Spectrum Fees in ECTEL Member States

## Consultation Response Form

---

This response form accompanies the ECTEL public consultation *Review of Annual Spectrum Fees in ECTEL Member States*. Please read the consultation document before completing this form. The questions below are reproduced from Appendix C of that document.

|                                   |                               |
|-----------------------------------|-------------------------------|
| <b>Closing date for responses</b> | 16 <sup>th</sup> October 2026 |
| <b>Return completed forms on</b>  | 16 <sup>th</sup> October 2026 |

### How to use this form

- Complete Section A (about you) and Section B (publication and confidentiality).
- In Section C, answer the questions relevant to you. You do not need to answer every question.
- For each closed question, indicate your view by typing an X in the relevant box, for example [X]. Then set out your reasons and any supporting evidence in the response area. The reasons matter more than the box, so please explain your view.
- Please keep your answers under the question numbers used here (Q1 to Q15). If you prefer to attach a separate document, please still answer by reference to these numbers so that responses can be compared.
- Return the completed form by the closing date shown above to the consultation email address (or by post).



## Section A: About you

Please tell us who is responding. If you are responding on behalf of an organisation, give the organisation's name.

|                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Name of respondent or organisation</b>                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Type of respondent (mark all that apply)</b>                             | <input type="checkbox"/> Mobile network operator <input type="checkbox"/> Fixed wireless or microwave link user <input type="checkbox"/> Broadcaster <input type="checkbox"/> Satellite or NTN service provider <input type="checkbox"/> Other spectrum user <input type="checkbox"/> Consumer representative <input type="checkbox"/> Government department or NTRC <input type="checkbox"/> Member of the public <input type="checkbox"/> Other (please specify) |
| <b>Contact name</b>                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Position or role</b>                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Email address</b>                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Telephone (optional)</b>                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Postal address (optional)</b>                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Member State(s) most relevant to your response (mark all that apply)</b> | <input type="checkbox"/> Dominica <input type="checkbox"/> Grenada <input type="checkbox"/> St Kitts and Nevis <input type="checkbox"/> Saint Lucia <input type="checkbox"/> St Vincent and the Grenadines <input type="checkbox"/> All five Member States <input type="checkbox"/> Not specific to one state                                                                                                                                                      |
| <b>Date of submission</b>                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

## Section B: Publication and confidentiality

ECTEL intends to publish responses to this consultation. If your response contains material you consider confidential, please provide a non-confidential version suitable for publication and explain why the material is confidential. ECTEL may not be able to accept blanket claims of confidentiality over an entire response and cannot promise confidentiality beyond what its disclosure obligations allow.

### Publication preference (mark one):

☐ I am content for this response to be published in full.

☐ This response may be published except for the confidential material identified below. A non-confidential version is provided.



[ ] This response is submitted in confidence. A non-confidential version suitable for publication is provided below or attached.

*If you have indicated confidential material, please identify it here and explain why it is confidential:*

## Section C: Your responses to the consultation questions

Please respond to the questions relevant to you. For each closed question, type an X in the box that best reflects your view, then set out your reasons and any supporting evidence in the response area. You do not need to answer every question.

### IMT spectrum fees (Section 5 of the consultation)

#### Question 1

Do you agree that annual IMT spectrum fees should be differentiated by band group, at XCD0.14/MHz/Pop for sub-1 GHz spectrum, XCD0.10/MHz/Pop for lower mid-band spectrum, and XCD0.03/MHz/Pop for upper mid-band spectrum? Please give reasons and any supporting evidence.

**Your view:** [ ] Agree [ ] Disagree [ ] Partially agree [ ] No view

*Your response (please give reasons and any supporting evidence):*



## Question 2

The five-state fee total can be allocated across Member States either in proportion to each state's population or in equal fifths, preserving a uniform fee per MHz in every state as now. Which basis do you favour, and why?

**Your view:** ☐ Population basis ☐ Equal fifths ☐ No preference ☐ Other

*Reasons for your preference (and any supporting evidence):*

## Question 3

Do you agree that Fixed Wireless Access assignments in IMT-suitable bands should be charged under the IMT fee schedule rather than the fixed-links schedule?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*



#### Question 4

Do you agree that the existing minimum annual IMT spectrum fee of XCD300,000 per licensee should be removed, so that each licensee's annual fee is determined solely by its assigned spectrum holdings? Please provide reasons and any supporting evidence.

**Your view:** ☐ Retain ☐ Modify ☐ Remove ☐ No view

*Your response (please give reasons and any supporting evidence):*

#### Fixed links (Section 6)

#### Question 5

Do you agree that fixed-link fees should be set by the formula Base fee x Bandwidth (MHz) x Band factor, with fees scaling linearly in bandwidth?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*



### Question 6

Do you agree with the proposed base fee of XCD336 per MHz per link?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*

### Question 7

Do you agree with the proposed band factors in Table 13? Please give reasons and any supporting evidence.

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*

### Question 8

Do you agree that the distinctions between link types and service types (backhaul, inter-site, other microwave) should be removed, with one fee per link regardless of configuration?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*



## Broadcasting (Section 7)

### Question 9

Do you agree with a 39% inflation adjustment to broadcasting channel fees, applied uniformly across Member States as the default schedule?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*

### Question 10

Do you agree with the proposed targeted relief mechanism for qualifying public-interest broadcasters? What eligibility criteria, evidence requirements and review periods should apply?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response, including any eligibility criteria, evidence requirements and review periods you propose:*



## Satellite and NTN (Section 8)

### Question 11

Do you agree that satellite earth station and VSAT fees should be charged per station rather than per frequency, at XCD20,000 per gateway earth station and XCD6,000 per VSAT earth station, uniform across frequency bands?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*

### Question 12

Do you agree with a single linear NTN spectrum fee of XCD25 per MHz per Member State per year for shared, non-exclusive satellite spectrum, with no additional spectrum fee where the service uses IMT spectrum already licensed to a mobile network operator?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*



## Other services (Section 9)

### Question 13

Do you agree with the removal of the paging entries from the fee schedule and with leaving fees for spread spectrum, land mobile, maritime mobile, aeronautical mobile, community radio and studio transmitter links unchanged?

**Your view:** ☐ Agree ☐ Disagree ☐ Partially agree ☐ No view

*Your response (please give reasons and any supporting evidence):*

### Question 14

Do you have any other comments on the proposals in this consultation?

*Any other comments:*

## Submitting your response

Please return the completed form by 16<sup>th</sup> October 2026. After the consultation closes, ECTEL will consider all responses and publish a decision document that summarises the responses received, sets out its decisions and explains the reasons for them.

**Thank you for responding to this consultation.**