

Item 12. Is the equipment in this application: * (a) a composite device subject to an additional equipment authorization? * (b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization? <i>If either of the above questions is answered "Yes" complete section 12(c).</i>					<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Yes <input checked="" type="radio"/> No
(c) The related application: <input type="radio"/> has been granted under the FCC ID listed to the right <input type="radio"/> is in the process of being filed under the FCC ID listed to the right <input type="radio"/> is pending with the FCC under the FCC ID listed to the right					FCC ID
Item 13. Name of test firm and contact person on file with the FCC, if different from applicant or contact person: Firm Name: SGS-CSTC Standards Technical Services Co., Ltd. First Name <input type="checkbox"/> Cai Last Name: Cai Telephone <input type="checkbox"/> +86(0)21 61402666 Ext: 2725 Fax No.: +86(0)21 54500149 E-mail: cai.cai@sgs.com					
Item 14. Enter any text that you would like to appear at the bottom of the Grant of Equipment Authorization.					
Read each certification carefully before answering and signing this application					
Equipment Specifications:					
Rule Part	Frequency Range (MHz)	Power (W)	Frequency Tolerance and Units	Emission Designator	Note Codes
Part 24E	1850.2 <input type="checkbox"/> 1909.8	0.7586			
Part 22H	824.2 <input type="checkbox"/> 848.8	1.6218			
Wi-Fi (802.11b)	2400~2438.5	0.0468			
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTITUTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).					
Item 15. *SECTION 5301 (ANTI-DRUG ABUSE) CERTIFICATION: The applicant must certify that neither the applicant nor any party to the application is subject to a denial of Federal benefits, that include FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862 because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the definition of a "party" for these purposes.					
Does the applicant or authorized agent so certify? <input checked="" type="radio"/> Yes <input type="radio"/> No					
Item 16. APPLICANT/AGENT CERTIFICATION: I certify that I am authorized to sign this application. All of the statements herein and the exhibits attached hereto, are true and correct to the best of my knowledge and belief. IN accepting a Grant of Equipment Authorization issued by the FCC as a result of the representations made in this application, the applicant is responsible for (1) labeling the equipment with the exact FCC ID specified in this application, (2) compliance statement labeling pursuant to the applicable rules, and (3) compliance of the equipment with the applicable technical rules. If the applicant is not the actual manufacturer of the equipment, appropriate arrangements have been made with the manufacturer to ensure that production units of this equipment will continue to comply with the FCC's technical requirements. Authorizing an agent to sign this application, is done solely at the applicant's discretion; however, the applicant remains responsible for all statements in this application. If an agent has signed this application on behalf of the applicant, a written letter of authorization which includes information to enable the agent to respond to the above section 5301 (Anti-Drug Abuse) Certification statement has been provided by the applicant. It is understood that the letter of authorization must be submitted to the FCC upon request, and that the FCC reserves the right to contact the applicant directly at any time.					

* Signature of Authorized Person Filing: Cai Cai Marie Ann Confroy	Title of authorized signature: Project Manager TCB Administrator
Complete items below if an agent signs the application Firm Name: SGS-CSTC Services Technical Services Co., Ltd. Address Line 1: 9/F, 3rd Building, No. 889, Address Line 2: Yishan Road Country (if foreign address):China Person at above address to receive Grant: First Name <input type="checkbox"/> Cai Title: Project Manager	
P.O.Box: City: Shanghai Zip/Postal Code:200233 Last Name:Cai Mail Stop:	
NOTE: An asterisk ** preceding a field indicates it must be completed before this application can be submitted.	