

I: Application and Agreement for Certification Services (RSP-100, Annex A)

(1) APPLICANT									
Applicant Name & Ac			Co	Contact Name:			Telephone:		
			En	nail Address:	:	Fax:			
() = .	REPRESENTATIV	E							
Canadian Rep Name &	& Address:		Co	Contact Name:			Telephone:		
	ı		En	Email Address:			Fax:		
Canadian Rep Compa	ny Number:								
O MANUEL OF	LIDED								
(3) MANUFACT						.			
Manufacturer Name &	Address:		Со	ntact Name:		Telep	none:		
			F	:1 A 11	_	F			
Manufacturer Compar	ny Number:		En	nail Address:	:	rax:	Fax:		
(4) CUSTOMER									
` '	ldress (Main Point of Co	ontact).	Co	ntact Name:		Telen	hone:		
Customer rume & ru	idress (Main Femi er ec	situet).		nituet i vanie.		reiep	Telephone:		
			En	nail Address:	:	Fax:			
]	PRODU	UCT INFOR	RMATION				
(5) Certification Nun	nber consisting of Com	pany Number and	d UPN	(maximum 1	1 characters):	IC:			
	n Id Number (HVIN):		1		*				
. ,		Wiodel Ivallioel							
. ,	n Id Number (FVIN):								
(8) Product Marketin	<u> </u>				Γ				
(9) Host Marketing N					Modular Approv	ral (MA): □	Limited Mod	ular A	pproval (LMA): 🗆
(10) Product Descrip									
(11) Specification Sta	andard:				Issue #:		Date:		
					Issue #:		Date:		
						2.50	_		
(12) Type of Equipm				SEARCH - Type of Equipment					
(13) Equipment Info	····ation.	☐ Transmitter				□ Saamman D	Scanner Receiver		
(15) Equipment Inion	rmation;	☐ New Certification (Single)				☐ Multiple l			
		□ New Family					sfer of TAC		
		☐ Existing Fam			C1PC)	☐ Partial Tra			
(14) Type of Service:		☐ Existing Family/ Modification (C			,				
		☐ Modifications (C3PC)							
		☐ Modification	s (C4PC	C)					
(15a) Is this product	subject to the TEL Lis	ting per Declarat	ion of (Conformity	Procedure DC	-01 (CS-03) ?	☐ Yes		□ No
(15b) For equipment equipment P25 Com	under RSS-119 (more	specifically in the	e range	768-776 &	798-806 MHz),	, is your	☐ Yes		□ No
(16) AGREEMENT:									
THE APPLICANT AG									
	y for all Vista Labs charges aris its in accordance with Radio Sta			nlicable procedu	ires.				
(iii.) Warrant that the test	t results submitted are a true rep	resentation of the charact	teristics of			certification is reque	ested;		
	or the Bureau of any changes to t a product cannot be distributing.			nda until it is liste	ed on the Industry Ca	nada Radio Equipn	ent List (REL).		
	Vista Labs will need to provide statements to the user of equipm								
		-	sir und 1 re	Applic		in model is offered	or sale and or ic	ase m	Cumudu
Name and Title of the	e Applicant (Please Pr	int or Type):		☐ Authorized Agent					
Signature:				Date:					



II: Test Report Cover Page/Performance Test Data (RSP-100, Annex B)

(17) PRODUCT INFORMATION									
Certification Number consisting	ng of Company Number and UPN (n	naximum 11 characters):	IC:						
Hardware Version Id Number	· (HVIN): *Model Number*								
Firmware Version Id Number	(FVIN):								
Product Marketing Name (PM	IN):								
ISED Test Site Name:	Vista Laboratories, Inc.	Address:	1261 Puerta Del Sol, San Clemente, CA 92673						
Phone:	+1 (949) 393-1123	Email:	info@vista-compliance.com						
(18) ISED Test Site(s) Reg #:		(19) SAR, RF Exposure, and/or Nerve Stimulation Lab Company #:							
	24068	SAR:							
	24000	RF Exposure:							
		Nerve Stimulation:							

` '		Band 1	Band 2	Band 3	Band 4	Band 5	Band 6	Band 7	Band 8
RSS # & Issue	e #								
Technology (GSM, CDMA, LT	ΓΕ, HSPA, WiMax)								
Band Class									
Frequency	Min (MHz)								
	Max (MHz)								
RF Power (2) (or list Field Strength below)	Min (W) Conducted								
	Max (W) Conducted								
Field Strengtl	h								
Units (dBuV, dBmV, dBuA, mV, uV)									
@ distance (3m, 10m, 30m, 300m)									
Measured BV	V (kHz)								
Method (6 dB, 20 dB, 26 dB, 99%, other)									
Radio Type (Analog or Digital)									
Necessary Bandwidth &									
Emission Classification									
(e.g. 11K0F3E, 7K60F1D, 1M10W7D)									
Transmitter S									
	c, dBm, dBuV, uV)								
	n, 10m, 30m, 300m)								
Receiver Spurious									
Units (uV, dBc, dBm, dBuV)									
@ distance (3m, 10m, 30m, 300m)									
Antenna Type & Gain (e.g. "Yagi, 6dBi")									

Notes: (1) Please copy and paste Table 20 above this section if additional bands are required. (2) Min and max power is required for SPECTRAweb. (3) Frequency Range = "0.###"; Field Strength = "0.#"; Field Strength = "0.#"



(20) Emission	is Information (1)								
		Band 9	Band 10	Band 11	Band 12	Band 13	Band 14	Band 15	Band 16
RSS # & Issue	e #								
Technology	CE HCDA WMA)								
Band Class	E, HSPA, WiMax)								
Frequency	Min (MHz)								
	Max (MHz)								
RF Power (2) (or list Field Strength below)	Min (W) Conducted								
	Max (W) Conducted								
Field Strength									
Units (dBuV, dBmV, dBuA, mV, uV)									
	, 10m, 30m, 300m)								
Measured BV	V (kHz)								
Method (6 dB, 20 dB, 26 dB, 99%, other)									
Radio Type (Analog or Digital)									
Necessary Bandwidth & Emission Classification (e.g. 11K0F3E, 7K60F1D, 1M10W7D)									
Transmitter S	purious								
	c, dBm, dBuV, uV)								
	, 10m, 30m, 300m)								
Receiver Spui									
Units (uV, dBc, dBm, dBuV)									
	, 10m, 30m, 300m)								
Antenna Type & Gain (e.g. "Yagi, 6dBi")		_					_		

Notes: (1) Please copy and paste Table 20 above this section if additional bands are required. **(2)** Min and max power is required for SPECTRAweb. **(3)** Frequency Range = "0.###"; RF Power = "0.###"; Field Strength = "0.#"

(21) Declaration:								
ATTESTATION: The test measurements were made in accordance with the above-mentioned departmental standard(s), and that the equipment identified in								
this application has been subject to all the applicable test conditions specified in the departmental standards and all of the requirements of the standards have								
been met.								
Name and Title of the Applicant (Please Print or Type):								
Signature:	Date:							