

FCC Part 15D – Compliance Information

EUT AND PRODUCT INFORMATION

Type of Equipment	UPCS (DECT 6.0)
Applicant Name	GN Netcom inc
Address	77 Northeastern Blvd., Nashua, NH 03062
Contact	Steen Kaiser

	FP	PP	Repeater
EUT Type/System	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
FCC ID	BCE-WHB004BS	BCE-WHB004HS	
Industry Canada ID	2386C-WHB004BS	2386C-WHB004HS	
Model name	WHB004BS	WHB004HS	
HW Version	E	H	
SW Version	1.8.0	1.8.0	
Max antenna Gain			
Can the EUT be Initiating Device	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
Does the EUT transmit signaling channels	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
Max number of slots in use simultaneously	2	2	
Test standard:	<input checked="" type="checkbox"/> FCC part 15D	<input checked="" type="checkbox"/> RSS-213, Issue 2 / RSS-GEN, Issue 3	
Frequency Band	1921.536 – 1928.448 MHz		
# of RF Channels	5		
Frame Period	10 ms		
Max. Burst length			
Min. Burst Length			
# of System Channels	60 (12 duplex channels per RF carrier)		
Operating Mode	<input type="checkbox"/> Simplex	<input checked="" type="checkbox"/> Duplex	

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ANTENNAS				
Base (FP)	Antenna	Type	Internal	External
	1		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	3		<input type="checkbox"/>	<input type="checkbox"/>
	4		<input type="checkbox"/>	<input type="checkbox"/>
	Does RX and TX use the same antenna(s)?			<input checked="" type="checkbox"/> Yes
Handset (PP)	Antenna	Type	Internal	External
	1		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Does RX and TX use the same antenna(s)?			<input checked="" type="checkbox"/> Yes

ANTENNA DIVERSITY			
	Antenna	Diversity Supported	
		TX	RX
Base (FP)	1	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>
	4	<input type="checkbox"/>	<input type="checkbox"/>
Handset (PP)	1	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>

VOLTAGE AND TEMPERATURE RANGES			
VOLTAGES	FP	PP	Repeater
Nominal Voltage	5	3.7	
Cut-Off Voltage (if applicable)			
POWER SOURCE	Type		Manufacturer
Base or Repeater	USB connection		-
Handset (PP) (charger)	Battery		Synergy
Data Connections	<input type="checkbox"/> PSTN <input checked="" type="checkbox"/> Others (please specify)USB		


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ANCILLARY EQUIPMENT	
Description	
Type	
Manufacturer	

HOST DEVICE	
Description	
Type	
Manufacturer	

ADDITIONAL INFORMATION

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MANUFACTURERS DECLARATIONS		
FCC part 15.323 (c)(5)		
The applicant declares that the system in this application has more than 40 duplex system access channels defined, and that the system is operating in Least Interfered Channel (LIC) mode in accordance with this section.		
Applicant Agrees	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
FCC part 15.323 (c)(5)		
No device or group of co-operating devices located within 1m of each other shall during any frame period occupy more than 6 MHz of aggregate bandwidth, or alternatively, more than one third of the time and spectrum windows defined by the system.		
Applicant Agrees	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
FCC part 15.323 (c)(10)		
The applicant hereby declares that the system in this application does use the criteria of (c)(10) of this section.		
Applicant Agrees	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
FCC part 15.323 (c)(11)		
The applicant hereby declares that system in this application does not use the criteria of (c)(11) of this section.		
Applicant Agrees	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
FCC part 15.323 (c)(12)		
The provisions of (c)(10) or (c)(11) of this section shall not be used to extend the range of spectrum occupied over space or time for the purpose of denying fair access to spectrum to other devices.		
Applicant Agrees	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
FCC part 15.307 (b)		
The Applicant is a participating member of UTAM, Inc. and will provide an affidavit from UTAM, Inc. certifying this.		
Confirmed By Applicant	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
ADDITIONAL REMARKS:		
>		
DECLARED BY:		
2012-09-25	Steen Kaiser	
Date	Name (print)	
		Signature