

APPLICATION FOR FCC EQUIPMENT AUTHORIZATION - FCC FORM 731 Inputs

Inputs to this document are binding and in parts subject to publication on FCC EAS!

Please ask CETECOM for support to fill in if you have doubts!

1	FCC ID: <u>Grantee code:</u> <b>BCG</b> Equipment Product Code: max 14 char. <b>.A1843</b>																				
2a	Applicant (complete, legal business name): <b>.Apple Inc.</b>																				
2b	Applicant's Mailing Address: number, street: <b>. 1 Infinite Loop</b> City: <b>.Cupertino</b> State (if US): <b>.CA</b> Country: <b>USA</b> Zip Code: <b>.95014</b>																				
2c	Applicants FCC Registration Number (FRN): <b>. 0005899216</b>																				
2d	Applicant's FCC registered Contact Person (will appear on Grant; will be the TCB contact if no agency allocated and given below) First Name: <b>. Marc</b> Last Name: <b>.Douat</b> Phone: <b>.4088622927</b> e-mail: <b>.mdouat@apple.com</b>																				
3a	Agency (if allocated and authorized from applicant, otherwise skip)																				
3b	Agency Address: number, street: City: State (if US): Country: Zip Code:																				
3c	Agency Contact Person (will be the main TCB contact if an agency is allocated and authorized from the applicant) First Name: Last Name: Phone: e-mail:																				
4a	Test Firm:																				
4b	Test Firm Address: number, street: City: State (if US): <b>CA</b> Country: <b>USA</b> Zip Code:																				
4c	Test Firm Contact Person (as on file with FCC): First Name: Last Name: Phone: <b>408-586-6200</b> e-mail:																				
5a	This Application includes a REQUEST FOR PERMANENT CONFIDENTIALITY for portion(s) of the data filed with this application pursuant to 47 CFR § 0.459 of the Commission Rules? (request letter required, ask CETECOM for guidance and template) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																				
5b	This Application includes a REQUEST FOR SHORT TERM CONFIDENTIALITY for portion(s) of the data filed with this application pursuant to 47 CFR § 0.459 of the Commission Rules? (request letter required, ask CETECOM for guidance and template) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 45 <input type="checkbox"/> 90 <input type="checkbox"/> 135 <input checked="" type="checkbox"/> 180 days or until mm/dd/yyyy (max 180days)																				
6	void																				
7	Equipment Class <b>.DTS, DSS</b>																				
8	Description of the Product as it is Marketed: <b>.Wireless keyboard</b>																				
9	Application is for authorization of a SOFTWARE DEFINED RADIO (SDR)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																				
10	Application is for MODULAR EQUIPMENT authorization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No modular type is: <input type="checkbox"/> single modular <input type="checkbox"/> limited modular <input type="checkbox"/> single split modular <input type="checkbox"/> limited split modular																				
11	Is there a KDB INQUIRY associated with this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No KDB Tracking number: .																				
12	This Application is for: <input checked="" type="checkbox"/> Original Equipment Authorization <input type="checkbox"/> Change of an FCC ID original FCC ID: Original Grant Date mm/dd/yyyy <input type="checkbox"/> Class II PERMISSIVE CHANGE / modification of a presently authorized equipment <input type="checkbox"/> Class III PERMISSIVE CHANGE to Software Defined Radio (SDR) (only for applications pertaining to SDR).																				
13	EQUIPMENT SPECIFICATIONS: for this item you may refer to related product documentation or test reports filed with this application, if the required information is listed there																				
	<table border="1"> <thead> <tr> <th>Frequency range in MHz low high</th> <th>Rated RF power output in Watts</th> <th>FCC rule part(s)</th> <th>description / technology</th> </tr> </thead> <tbody> <tr> <td>2402 2480</td> <td>See test report</td> <td>15c</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>extend</td> <td>if</td> <td>more inputs</td> <td>15B</td> </tr> </tbody> </table>	Frequency range in MHz low high	Rated RF power output in Watts	FCC rule part(s)	description / technology	2402 2480	See test report	15c										extend	if	more inputs	15B
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14	The Equipment Subject to this Application is: <input type="checkbox"/> (A) a COMPOSITE DEVICE subject to an additional equipment authorization or <input type="checkbox"/> (B) is part of a system that operates or is marketed with another device subject to an equipment authorization If either (A) or (B) above applies, mark below if the related application: <input type="checkbox"/> has been granted <input type="checkbox"/> is currently filed <input type="checkbox"/> is pending with the FCC <input type="checkbox"/> has a mix of granted and pending statuses at the time of this application under the FCC ID(s) listed to the right																				
	FCC ID: .																				

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<b>Read each certification carefully before answering and signing this application</b>			
<b>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).</b>			
<b>17</b>	<p><b>EQUIPMENT AUTHORIZATION WAIVER</b></p> <p>Is there an equipment authorization waiver associated with this application? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></p> <p>If there is an equipment authorization waiver associated with this application, has the associated waiver been approved and all information uploaded? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>		
<b>18</b>	<p><b>SECTION 5301 (ANTI-DRUG ABUSE) CERTIFICATION:</b></p> <p>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.</p> <p>Does the applicant or authorized agent so certify? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span></p>		
<b>19</b>	<p><b>APPLICANT / AGENT CERTIFICATION</b></p> <p>I certify that I am authorized to sign this application.</p> <p>All of the statements herein and the exhibits attached hereto, are true and correct to the best of my knowledge and belief.</p> <p>In accepting a Grant of Equipment Authorization issued by the FCC recognized TCB of CETECOM Inc. as a result of the representations made in this application, the applicant is responsible for</p> <p>(1) labeling the equipment with the exact FCC ID specified in this application,</p> <p>(2) compliance statement labeling pursuant to the applicable rules, and</p> <p>(3) compliance of the equipment with the applicable technical rules.</p> <p>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.</p> <p>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.</p> <p>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 FCC reserves the right to contact the applicant directly at any time.</p>		
<b>20</b>	<p><b>APPLICANT / AGENT Attestation</b></p> <p>I confirm that I have received the <i>CETECOM Inc PCB Product Certification Guide</i> as part of the overall guidance provided by the product certification body (PCB) and/or project management of CETECOM Inc. in the course of the preparation of this application.</p> <p>I confirm that I am knowledgeable of the Grantee' obligations and duties as relevant to this application and as laid down in the FCC rules and FCC publications of which the most relevant are listed in the aforementioned PCB Certification Guide.</p>		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>Signature of the Authorized Person:</p> </td> <td style="width: 50%; vertical-align: top;"> <p>Name and Title of the Authorized Signer:</p> <p><b>.Marc Douat</b></p> <p>Company Name of the Authorized Signer:</p> <p><b>.Apple Inc.</b></p> </td> </tr> </table>		<p>Signature of the Authorized Person:</p>	<p>Name and Title of the Authorized Signer:</p> <p><b>.Marc Douat</b></p> <p>Company Name of the Authorized Signer:</p> <p><b>.Apple Inc.</b></p>
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