

FEDERAL COMMUNICATIONS COMMISSION

Approved by OMB
3060-0057

FCC FORM 731 *89325*

For
FCC
use
only

APPLICATION FOR EQUIPMENT AUTHORIZATION

SECTION I - ALL ITEMS IN THIS SECTION MUST BE COMPLETED

1. Applicant's complete, legal business name
NEXT LEVEL SYSTEMS, INC. Check here if this is a change in
and/or address not previously
reported (See 47 CFR §2.934)

2. Applicant's mailing address (Line 1)
6262 Lusk Boulevard APR 16 1998

Applicant's mailing address (Line 2) (if required)
COLUMBIA, MD

City
San Diego

State or Country (if foreign address)
California

ZIP/Postal Code
92121

3. FCC ID: (a) Grantee Code (b) Equipment Product Code
F 2 N URC440T

4. Name, Title and Mail Stop, if any, of person at the applicant's address to receive grant, or for contact: (See instructions)
Kerry Galloway

5.(a) Telephone No. (Area/Country/City code, No. and Ext.)
1 (619) 404-2580

(b) FAX No. (Area/Country/City code and No.)
1 (619) 404-2501

(c) Internet e-mail address:
kgalloway@nlvl.com

SECTION II - See 47 CFR §1.1103 for Fee Type Codes and Fees. Fee Type Codes are listed in Paragraph C of the attached instructions.

Enter in Column (A) the correct Fee Type Code for the service for which you are applying. Enter in Column (B) the result obtained from multiplying the Fee amount for the Fee Type Code in Column (A) by the number entered in Column (B). If requesting more than ONE service, enter additional Fee Type Code(s) in Section III below.

(A)	(B)	(C)	FOR FCC USE ONLY
FEE TYPE CODE	FEE MULTIPLE	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	
(1) E G C	0 0 0 1	\$ 895.00	

SECTION III - Use when requesting more than one service. If only one service is requested, complete only Section II and Section III, item (5).

(A)	(B)	(C)	FOR FCC USE ONLY
FEE TYPE CODE	FEE MULTIPLE	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	
(2)	0 0 0 1	\$	
(3)	0 0 0 1	\$	
(4)	0 0 0 1	\$	
Add all amounts shown in column C, lines (1) through (4), and enter the total here. (5) This amount should equal your enclosed remittance.			FOR FCC USE ONLY
TOTAL AMOUNT REMITTED WITH THIS APPLICATION OR FILING \$ 895.00			

1.(a) Instead of Applicant, FCC is authorized to mail original Grant to: (See instructions)
 Firm name, DNB Engineering, Inc.
 number, street, 1100 East Chalk Creek Rd.
 City, State/Country, Coalville, UT
 ZIP/Postal Code 84017

(b) Name, Title and Mail Stop, if any, of person at above address to receive Grant: (If 1.(a) is completed, this item must be completed)
 Rick Linford - Facility Manager

2.(a)- Technical contact: Rick Linford Firm name, DNB Engineering, Inc. contact person, 1100 East Chalk Creek Rd. number, street, Coalville, UT City, State/Country, 84017 ZIP/Postal Code	(b) Telephone No. (Area/Country/City code, No. and Ext.) 1 (435) 336-4433 (c) FAX No. (Area/Country/City code and No.) 1 (435) 336- 4436
---	---

(d) Internet e-mail address: rlinford@allwest.net

(e) Non-Technical contact: Firm name, contact person, number, street, City, State/Country, ZIP/Postal Code	(f) Telephone No. (Area/Country/City code, No. and Ext.) (g) FAX No. (Area/Country/City code and No.)
---	--

(h) Internet e-mail address:

3. Does this application include a request for confidentiality for any portion(s) of the data contained in this application pursuant to 47 CFR §0.459 of the Commission's Rules? If "Yes" see instructions. Yes No

4. Does the applicant request that the Commission defer grant of this application pursuant to 47 CFR §0.457(d)(1)(ii)? (See instructions) Yes No

5. Type of equipment authorization requested: (check one box only) Certification Type Acceptance Notification

6.(a) Equipment Code and description: (See instructions, page 4) D S C (b) Equipment will be operated under FCC Rule Part(s): Part 15 Subpart C

7. Application is for: (Check one box only)

<input checked="" type="checkbox"/> 1. Original equipment (See instructions)	<input type="checkbox"/> 2. Change in identification of presently authorized equipment <hr style="width:100%;"/> <div style="display: flex; justify-content: space-between;"> ORIGINAL FCC ID Grant date </div>	<input type="checkbox"/> 3. Class II permissive change or modification of presently authorized equipment (See instructions)
--	--	---

8. EQUIPMENT SPECIFICATIONS: (See instructions)

(a) Frequency range in MHz	(b) Rated RF power output in watts	(c) Frequency tolerance % Hz, ppm	(d) Emission designator (See 47 CFR §2.201 and §2.202)	(e) Microprocessor model number
433.9 MHz	N/A	N/A	N/A	N/A

9. Is the equipment in this application:
 (a) a composite device subject to more than one type of equipment authorization? Yes No

(b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization? Yes No

If either of the above questions is answered "Yes" complete items 10.(a) and (b). (See instructions)

SECTION IV (continued) - Enter FCC ID from Page 1, Section I F2NURC440T

10.(a) Additional type of equipment authorization required: Certification Type Acceptance Notification

(b) The related application checked in item 10.(a) (Check one box only)

has been filed at the same time as this application under the FCC ID listed below has been granted under the FCC ID listed below is in the process of being filed under the FCC ID listed below is pending with the FCC under the FCC ID listed below

F2NURC440T
FCC ID

1.(a) Name of test firm on file with the FCC, if different from applicant or contact person:
See Section 4, Item 1A

(b) Mailing address, number, street, City, State/Country, ZIP/Postal Code
See Section 4, Item 2a

(c) Telephone No. (Area/Country/City code, No. and Ext.)
See Section 4, Item 2b

(d) FAX No. (Area/Country/City code and No.)
See Section 4, Item 2c

(e) Internet e-mail address: See Section 4, Item 2d


12. Number of exhibits submitted with this application: 1

SECTION V - Read each certification carefully before answering and signing this application.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

1. 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? Yes No

2.(a) 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.


Original written signature of authorized signer
KERRY GALLOWAY
▲ Typed/printed name of authorized signer

MARCH 23, 1998
▲ Date (Month, Day, Year)
SENIOR REGULATORY ENGINEER
▲ Title of authorized signer

▼ Complete items below if an agent signs the application.

(b) Agent's business name, number, street, City, State/Country, ZIP/Postal Code
N/A

(c) Telephone No. (Area/Country/City code, No. and Ext.)

(d) FAX No. (Area/Country/City code and No.)

(e) Internet e-mail address:

4. LABELING REQUIREMENTS - PER 2.1033(B)(7)

Label will be constructed of 0.02 inch plastic attached as shown on the equipment with permanent adhesive.

All information on the label will be etched or screened. All methods will exceed the expected lifetime of the equipment.

The label will be large enough to allow all information to be readily legible.

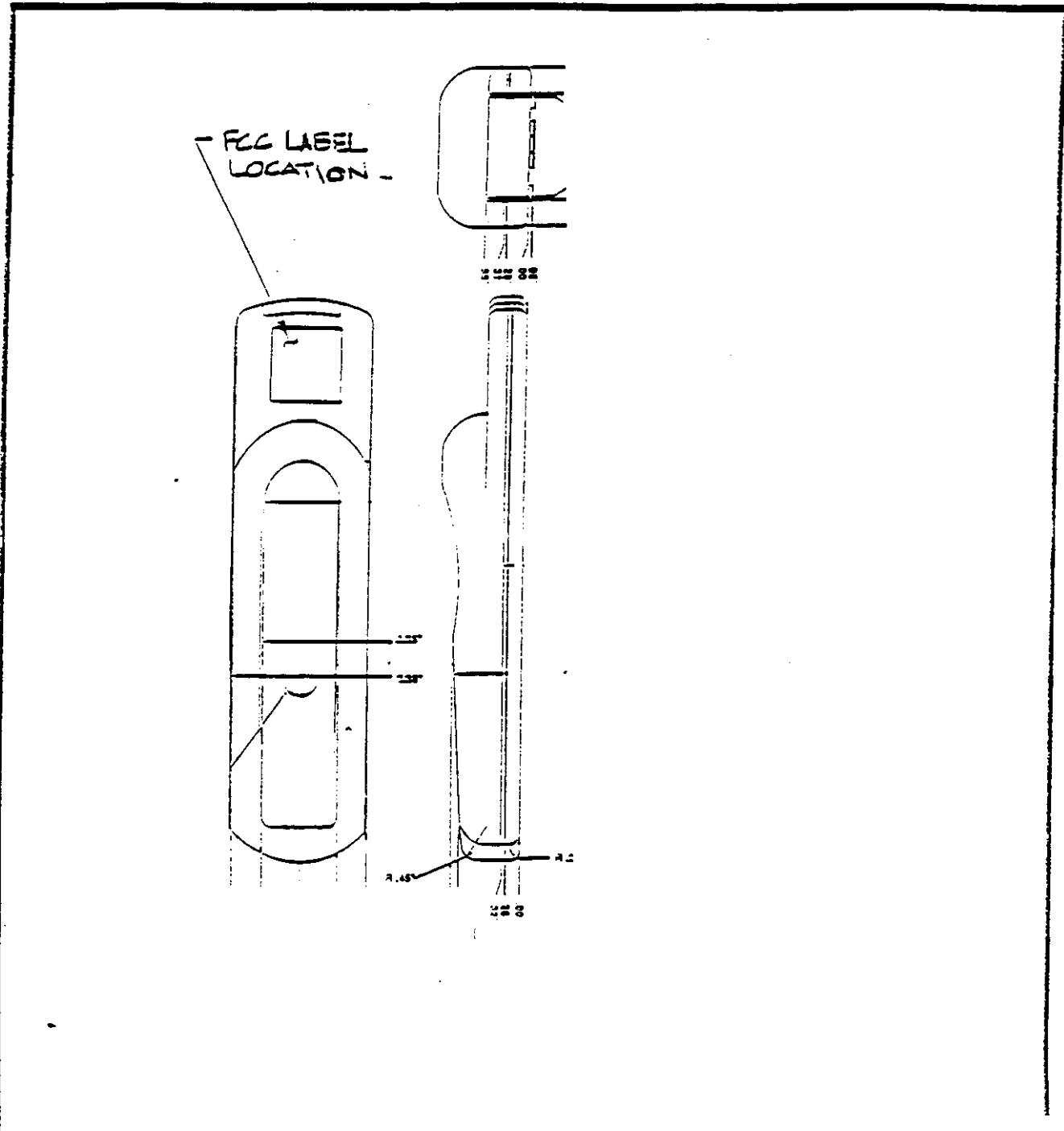
4.1 Additional Label Required

This device complies with Part 15 of the FCC Rules. Operation is subject to the following two conditions: (1) This device may not cause harmful interference, and (2) This device must accept any interference received, including interference that may cause undesired operation.

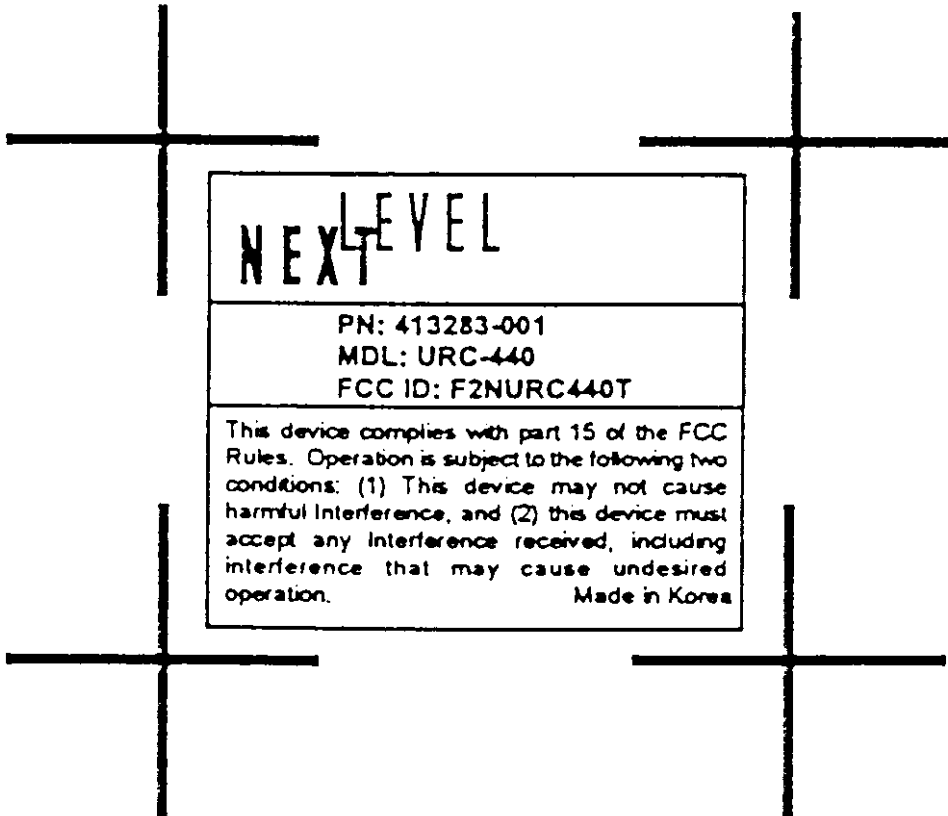
Shown above is a copy of the label with the Part 15.19 Compliance Statement, Location of required information is checked "below".

- The label will be placed in a conspicuous location on the device.*
- The device is too small for a compliance label. Therefore the label will be placed in a prominent location in the Instruction Manual or other information supplied to the user.*
- The device is too small for a compliance label. The label will be placed on the container in which the device will be marketed.*

Placement of label on device



Contents of label



5. OWNERS MANUAL

Compliance statement is on page 40.



(435) 336-4433
 (800) 887-4433 (Utah Only)
 FAX (435) 336-4436

DNB ENGINEERING, INC.
 CHALK CREEK TEST FACILITY
 1100 E. CHALK CREEK ROAD
 COALVILLE, UT 84017

**CERTIFICATION
 OF
 AGENCY AGREEMENT**

I appoint RICK LINFORD of DNB ENGINEERING, INC. to act as agent for our organization in the preparation of applications, including the signing thereof, to make representations to the FEDERAL COMMUNICATIONS COMMISSION on our behalf and to receive and exchange data between the two parties:

FEDERAL COMMUNICATIONS COMMISSION

and

NEXT LEVEL SYSTEMS

It is further understood that all information supplied to DNB ENGINEERING, INC. as representations of our company, i.e. FCC ID labels, schematics, instruction manuals, etc., will continue to comply in production; that each unit manufactured, imported or marketed, as defined in the Commissions regulations, will conform to the sample(s) tested within the variations that can be expected due to quantity production and testing on a statistical basis; will comply with the FEDERAL COMMUNICATIONS COMMISSION requirements.

Dated this 23 day of March, 1998.

Agency Agreement expiration date: January 1, 1999

By: Kerry Galloway KERRY GALLOWAY
 Signature Printed

Title: SENIOR REGULATORY ENGINEER Telephone: (619) 404-2580

Applicant: NEXT LEVEL SYSTEMS
6450 SEQUENCE DRIVE
SAN DIEGO, CA 92121
 (complete address)