

WILKINSON ) BARKER ) KNAUER ) LLP

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JEFFREY COHEN  
202 383-3369  
jcohen@wbklaw.com

December 22, 2000

By Federal Express and Electronic Submission

Mr. Joe Dichoso  
Federal Communications Commission  
Equipment Authorization Division  
7435 Oakland Mills Road  
Columbia, MD 21046

Re: *Schlumberger Resource Management Services, Inc.*  
Response to Request for Further Information  
FCC ID: F9C-CMM1102  
Reference No: 16846

Dear Mr. Dichoso:

We are writing in response to your request for further information concerning an application to transfer the FCC Identification number of device F9C-CMM1102. On behalf of Schlumberger Resource Management Services, Inc. ("Applicant"), in August, 2000, we submitted applications to change all of the FCC Identification numbers held by CellNet Data Systems, Inc. ("CellNet"), grantee code H6N, to Applicant's grantee code, F9C. The purpose of these applications was to notify the Commission that Applicant purchased the assets of CellNet, including the equipment authorizations. Pursuant to the direction of Richard Fabina, Chief, Equipment Authorization Branch, the submissions consisted of a separate Form 731 for each of the devices and a single Form 159, which included payment for a single fee intended to cover all of the FCC Identification number transfers.

On October 30, 2000, we received e-mail correspondence from you requesting further information regarding F9C-CMM1102. Specifically, you requested that we provide all items required by section 2.933 of the Commission's rules, external photographs of the device and all antennas, and an exhibit indicating compliance with RF safety requirements. After further discussion with Mr. Fabina, we now provide additional information pursuant to section 2.933, we also enclose a copy of an external photograph of the device, a sketch of the new label, a copy of

the Form 731 previously filed electronically with an exhibit describing the transaction, a copy of the Form 159 filed on behalf of Applicant and submitted for all of the equipment authorizations related to the transaction, and a copy of your e-mail requesting further information. We are also submitting all of the above materials and a copy of this letter electronically.

Regarding section 2.933(b)(5), referencing the photographs required by section 2.1033(b)(7), we are providing the photographs of the exterior appearance of the device. The device is a Part 15 utility meter and does not include any external antennas. We also provided a sketch of the new label to be used in future production. The positioning of this new label on the device will not change from the positioning of the old label.

With respect to your request for exhibit indicating compliance with RF safety requirements, section 1.1307(b)(1), of the Commission's rules, which is referenced by section 15.247(b)(4), categorically excludes Applicant from the requirement to conduct a routine environmental evaluation for RF exposure for the subject device. The Part 15 device is not listed in subsection 1.1307(b)(1) Table 1 or in subsection 1.1307(b)(2), and therefore falls into the excluded category. Accordingly, the Commission's rules do not require the submission of an RF evaluation.

Should you have any questions regarding this matter, please contact Zachary Zehner at (202) 383-3424 to expedite resolving any outstanding issues regarding the pending application.

Sincerely,  
WILKINSON BARKER KNAUER, LLP



By: Jeffrey S. Cohen  
Zachary A. Zehner\*

Enclosures

\* Practice limited to matters and proceedings before federal courts and agencies.

### **Exhibit**

The following exhibit represents the “attached statement” and information required by section 2.933(b) of the Commission’s rules for an application for an equipment authorization where no change in design, circuitry, or construction is involved:

1) Original Identification Used Prior to Change in Identification (section 2.933(b)(1)):

H6N-CMM1102.

2) The Date of the Original Equipment Authorization (section 2.933(b)(2)):

March 30, 1999. See attachment for copies of original equipment authorizations.

3) How the Equipment Bearing Modified Identification Differs from Original Equipment (section 2.933(b)(3)):

The equipment bearing the modified identification does not differ from the original equipment.

4) Whether the Original Test Results Continue to be Representative of and Applicable to the Equipment Bearing Changed Identification (section 2.933(b)(4)):

The original test results continue to be representative of and applicable to the equipment bearing the changed identification.

5) The Photographs Showing Exterior of Appearance of Equipment (section 2.933(b)(5)):

See attachment.



# Federal Communications Commission

## The Form 731 Application You Just Entered Has Been Submitted Successfully to the Laboratory Division. Please Record The Following Information For Future Reference:

If any information has been entered incorrectly on the 731 or 159 form, please contact [btaube@fcc.gov](mailto:btaube@fcc.gov) for correction rather than submitting a second 731 or 159.

Form 731 Confirmation Number:	EA98833
FCC ID:	F9CCMM1102
Date of Submission:	Sep 21 2000 5:16PM
Press this button to begin document submission process.	Press this button to go directly to FCC Remittance Form (Form 159).
Proceed to Exhibits Form	Proceed to Fee Form (159)

[FCC Home Page](#) | [Search](#) | [Commissioners](#) | [Bureaus/Offices](#) | [Finding Info](#)

*Mail your comments or suggestions (To: [btaube@fcc.gov](mailto:btaube@fcc.gov))*  
FCC - Federal Communications Commission - FCC\_731

<b>FEDERAL COMMUNICATIONS COMMISSION - FCC FORM 731</b> <b>APPLICATION FOR EQUIPMENT AUTHORIZATION</b>	Approved by: 3060 - 0057 Expires 9/30
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You will be presented with the FCC FORM 159, Fee Remittance Advice after submitting your application and obtaining FCC Form 159, must currently be submitted in paper form along with payment to the address indicated in the FCC Fee is not currently available.

**Item 1. Applicant's complete, legal business name:** Schlumberger Resource Management Services Inc.

**Item 2. Applicant's mailing address**

Line 1: 1600 Alabama Highway 229

Line 2:

P.O.Box:

City: Tallassee

State: AL Country(if foreign address): Zip/Postal Code: 36078

**Item 3. FCC ID: Grantee code: f9c \* Equipment Product Code (14 characters maximum):** cmm1102

**Item 4. Person at the applicant's address to receive grant or for contact:**

First Name: Jim

Last Name: Brennan

Title:

E-mail:

Mail

Telep

Fax N

**Item 5. Instead of Applicant, FCC is authorized to mail original Grant to:**

Firm Name:

Address Line 1:

P.O.Box:

Address Line 2:

City:

Country(if foreign address):

Zip/Postal Code:

**Person at above address to receive Grant:**

First Name:

Last Name:

Title:

Mail Stop:

**Item 6. Technical Contact:**

Firm Name:

Telephone:

Ext:

Fax No

First Name:

Middle Initial:

Last Name:

Address Line 1:

P.O.Box:

Address Line 2:

City:

Country(if foreign address):

Zip/Postal Code:

E-mail:

**Item 7. Non-Technical Contact:**

Firm Name:

Telephone:

Ext:

Fax No

Wilkinson Barker Knauer, LLP

202-783-4141

202-783-

First Name:

Middle Initial:

Last Name:

Jeffrey

S

Cohen

<b>Address Line 1:</b> 2300 N Street, NW, Suite 700	<b>P.O.Box:</b> _____
<b>Address Line 2:</b> _____	<b>City:</b> Washington
<b>Country(if foreign address):</b> _____	<b>Zip/Postal Code:</b> 20037-1128
<b>E-mail:</b> jcohen@wbklaw.com	

<b>Item 8. * 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 Rules? If "Yes" see instructions.</b>	<input type="radio"/> Yes <input checked="" type="radio"/>
<b>Item 9. * Does the applicant request that the Commission defer grant of this application pursuant 47 CFR § 0.457(d)(1)(ii)? (See instructions)</b> If so, specify date when grant may be issued (MM/DD/YYYY format): _____	<input type="radio"/> Yes <input checked="" type="radio"/>

<b>Item 10. Equipment Code:</b> DSS -Part 15 Spread Spectrum Transmitter	<input checked="" type="checkbox"/>	<b>* Description of Product as it is Marketed:</b> Utility Company Data Collection Transceiver
<b>* Equipment will be operated under FCC Rule Part(s):</b> 15		

**Item 11. \* Application is for:**

☐ Original Equipment (See instructions)  
☒ Change in identification of presently authorized equipment: Original FCC ID: h6ncmm1102 Grant Date: \_\_\_\_\_  
☐ Class II permissive change or modification of presently authorized equipment (See instructions)

Frequency range in MHz		Rated RF power output in watts	Frequency tolerance	Em (See 47 C
917.58	917.58	.0724	_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	
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			_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	
			_____ <input checked="" type="checkbox"/>	

<b>Item 13. Is the equipment in this application:</b> * (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 13(c).</i>	<input type="radio"/> Yes <input checked="" type="radio"/> <input type="radio"/> Yes <input checked="" type="radio"/>
<b>(c) The related application:</b> <input type="radio"/> has been filed at same time as this application under the FCC ID listed to the right <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	

**Item 14. Name of test firm and contact person on file with the FCC, if different from applicant or contact person:**

**Firm Name:** \_\_\_\_\_ ☒

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax No: \_\_\_\_\_ E-mail: \_\_\_\_\_

Read each certification carefully before answering and signing this

**WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IN SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTITUTION PE 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 ber 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862 because of a conviction for possession or distribution of a contr definition of a "party" for these purposes.

Does the applicant or authorized agent so certify? ☒ Yes ☐ 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 tr IN accepting a Grant of Equipment Authorization issued by the FCC as a result of the representations made in this appli equipment with the exact FCC ID specified in this application, (2) compliance statement labeling pursuant to the applical applicable technical rules. If the applicant is not the actual manufacturer of the equipment, appropriate arrangements ha 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

If an agent has signed this application on behalf of the applicant, a written letter of authorization which includes informa section 5301 (Anti-Drug Abuse) Certification statement has been provided by the applicant. It is understood that the lett request, and that the FCC reserves the right to contact the applicant directly at any time.

**\* Signature of Authorized Person Filing:**

Ben Lyon

Title of auth  
Vice President

Complete items below if an agent signs the application

Firm Name: \_\_\_\_\_ Telephone: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax No: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address Line 1: \_\_\_\_\_ P.O.Box: \_\_\_\_\_  
 Address Line 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Country(if foreign address): Zip/Pc \_\_\_\_\_  
 E-mail: \_\_\_\_\_

NOTE: An asterisk '\*' preceding a field indicates it must be completed before this applic:

Continue Clear

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*Mail your comments or suggestions (To: [btaube@fcc.gov](mailto:btaube@fcc.gov))  
 FCC - Federal Communications Commission - FCC\_731*

**STAMP AND RETURN**

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #358315		FEDERAL COMMUNICATIONS COMMISSION <b>REMITTANCE ADVICE</b> PAGE NO. _____ OF _____ AUG 3 1 15 PM '00 FCC/MELLON		APPROVED BY OMB 3060-058 USE FCC USE ONLY	
<b>SECTION A - Payer Information</b>					
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Wilkinson Barker Knauer, LLP				(3) TOTAL AMOUNT PAID (dollars and cents) \$940.00	
(4) STREET ADDRESS LINE NO. 1 2300 N Street, N.W., Suite 700					
(5) STREET ADDRESS LINE NO. 2					
(6) CITY Washington				(7) STATE DC	(8) ZIP CODE 20037-1128
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 202-783-4141				(10) COUNTRY CODE (IF NOT IN U.S.A.)	
If payer name and the applicant name are different, complete Section B. If more than one applicant, use continuation sheets (Form 159-C).					
<b>SECTION B - Applicant Information</b>					
(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card) Schlumberger Resource Management Service					
(12) STREET ADDRESS LINE NO. 1 1600 Alabama Highway 229					
(13) STREET ADDRESS LINE NO. 2					
(14) CITY Tallahassee				(15) STATE AL	(16) ZIP CODE 36078
(17) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 334-283-6555				(18) COUNTRY CODE (IF NOT IN U.S.A.)	
<b>SECTION C - Payment Information</b>					
(19A) FCC Call Sign/Other ID	(20A) Payment Type Code(PTC) EGC	(21A) Quantity 1	(22A) Fee Due for (PTC) in Block 20A \$940.00		
(23A) FCC CODE 1 F9C26112495		(24A) FCC CODE 2 13EA98587			
(19B) FCC Call Sign/Other ID	(20B) Payment Type Code(PTC)	(21B) Quantity	(22B) Fee Due for (PTC) in Block 20B		
(23B) FCC CODE 1		(24B) FCC CODE 2			
(19C) FCC Call Sign/Other ID	(20C) Payment Type Code(PTC)	(21C) Quantity	(22C) Fee Due for (PTC) in Block 20C		
(23C) FCC CODE 1		(24C) FCC CODE 2			
(19D) FCC Call Sign/Other ID	(20D) Payment Type Code(PTC)	(21D) Quantity	(22D) Fee Due for (PTC) in Block 20D		
(23D) FCC CODE 1		(24D) FCC CODE 2			
<b>SECTION D - Taxpayer Information (Required)</b>					
(25) PAYER TIN 0521264167		(26) Complete this block only if applicant name in B-11 is different from payer name in A-2 APPLICANT TIN 0 510204865			
<b>SECTION E - Certification</b>					
(27) CERTIFICATION STATEMENT I, Jeffrey S. Cohen, certify under penalty of perjury that the foregoing and supporting information ( PRINT NAME) are true and correct to the best of my knowledge, information, and belief. SIGNATURE <i>Jeffrey S. Cohen</i>					
<b>SECTION F - Credit Card Payment Information</b>					



Wilkinson Barker Knauer, LLP  
2300 N Street N.W., Suite 700  
Washington, D.C. 20037-1128

16-3 00012  
540

58726

Date 08/29/00

\$940.00

PAY Nine Hundred Forty and 00/100 Dollars

TO THE  
ORDER  
OF

FEDERAL COMMUNICATIONS COMMISSION

RIGGS BANK, N.A.  
LINCOLN OFFICE  
WASHINGTON, D.C. 20006

  
AUTHORIZED SIGNATURE

⑈058726⑈ ⑆054000030⑆ 08451252⑈

**FEDERAL COMMUNICATIONS  
COMMISSION**  
WASHINGTON, D.C. 20554

COPY

COPY

**GRANT OF EQUIPMENT  
AUTHORIZATION**  
Certification

CellNet Data Systems  
125 Shoreway Road

Date of Grant: 03/30/1999

San Carlos, CA 94070

Application Dated: 02/03/1999

Attention: Forrest Fulton

**NOT TRANSFERABLE**

EQUIPMENT AUTHORIZATION is hereby issued to the named GRANTEE, and is VALID ONLY for the equipment identified hereon for use under the Commission's Rules and Regulations listed below.

**FCC IDENTIFIER**  
Name of Grantee

H6NCMM1102  
CellNet Data Systems

**Equipment Class:** Part 15 Spread Spectrum  
Transmitter

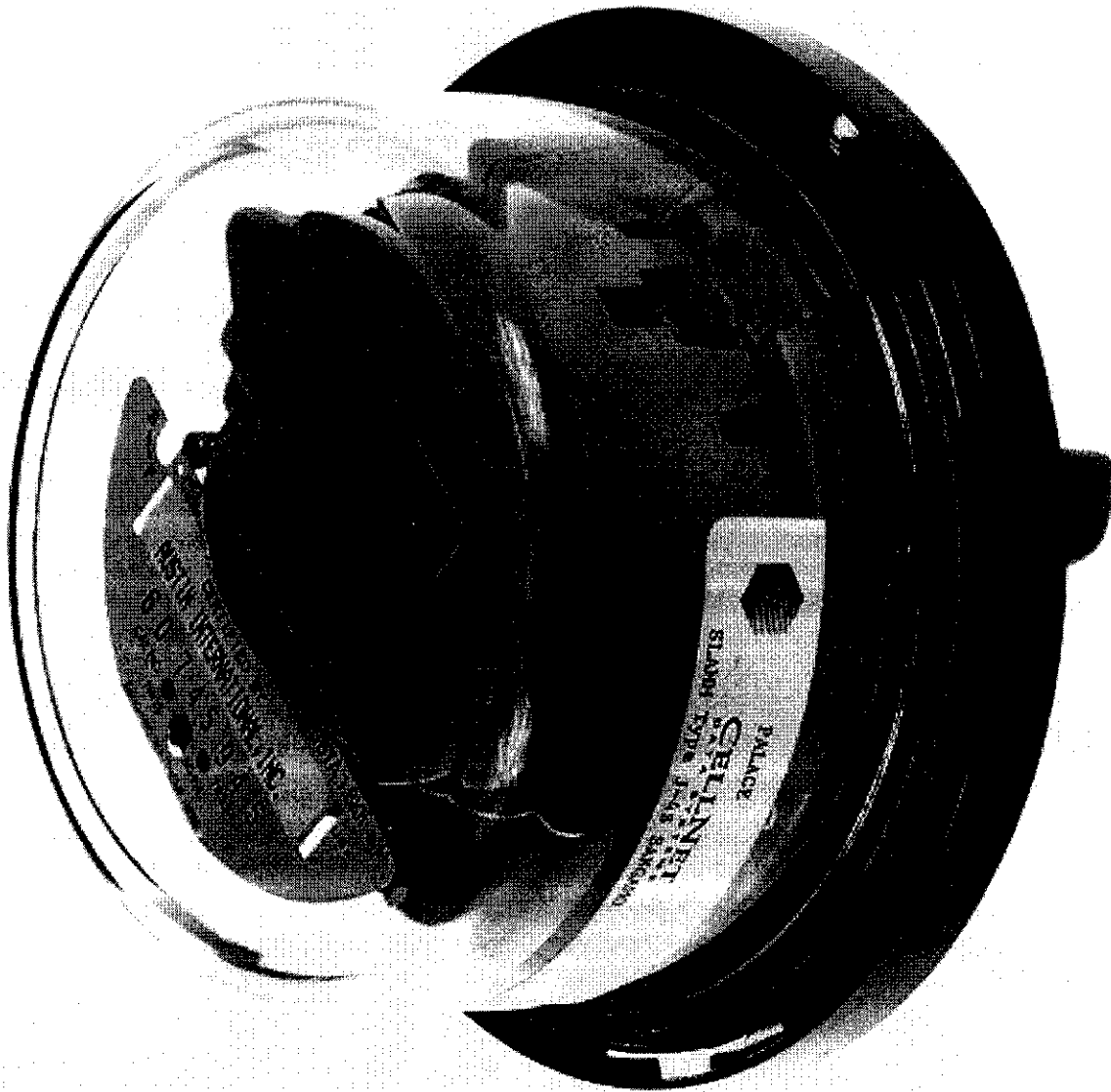
**Notes:**

<u>Grant Notes</u>	<u>FCC Rule Parts</u>	<u>Frequency Range (MHZ)</u>	<u>Output Watts</u>	<u>Frequency Tolerance</u>	<u>Emission Designator</u>
37	15	917.58 - 917.58	0.0724		

37: This device has shown compliance with new rules adopted under Docket 87-389 and is not affected by Section 15.37, transition rule.

Mail To:

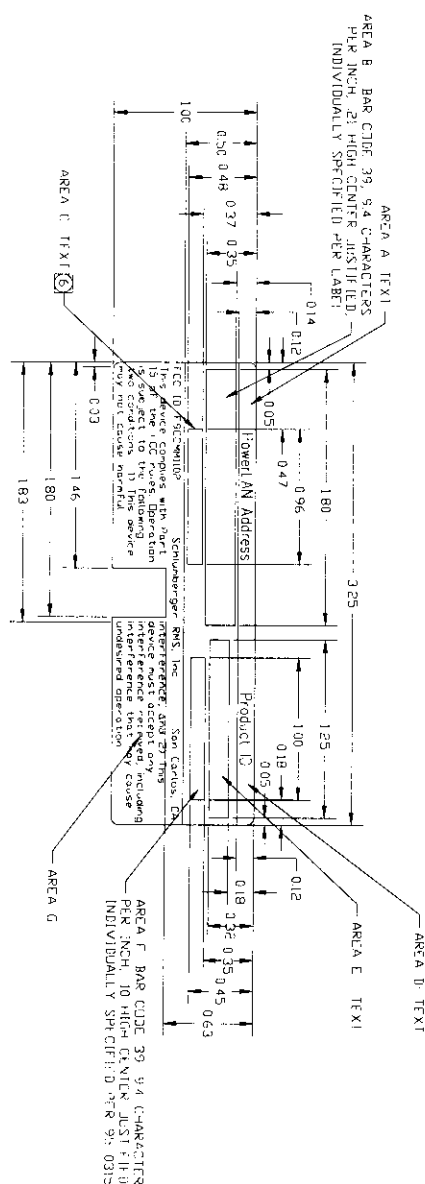
EA93151



Cellnet Data Systems  
FCC ID: H6NCMM1102  
External View

THIS DOCUMENT CONTAINS INFORMATION OF A CONFIDENTIAL NATURE. IT IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE. IT IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE. IT IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE.

REV	DATE	APPROVED
01	02/99	
02	06/99	
03	06/99	
04	12/00	



- NOTES
1. MATERIAL: 300" THICK WHITE POLYESTER WITH 3M #400 TYPE ADHESIVE 3M 7921 OR EQUIVALENT WITH PROTECTIVE BACKING.
  2. THE FRONT BACK AND REVERSE BACKGROUNDS AREAS A, D AND E BLACK TEXT WITH WHITE BACKGROUND AREAS B, C, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AP, AQ, AR, AS, AT, AU, AV, AW, AX, AY, AZ, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BO, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, CR, CS, CT, CU, CV, CW, CX, CY, CZ, DA, DB, DC, DD, DE, DF, DG, DH, DI, DJ, DK, DL, DM, DN, DO, DP, DQ, DR, DS, DT, DU, DV, DW, DX, DY, DZ, EA, EB, EC, ED, EE, EF, EG, EH, EI, EJ, EK, EL, EM, EN, EO, EP, EQ, ER, ES, ET, EU, EV, EW, EX, EY, EZ, FA, FB, FC, FD, FE, FF, FG, FH, FI, FJ, FK, FL, FM, FN, FO, FP, FQ, FR, FS, FT, FU, FV, FW, FX, FY, FZ, GA, GB, GC, GD, GE, GF, GG, GH, GI, GJ, GK, GL, GM, GN, GO, GP, GQ, GR, GS, GT, GU, GV, GW, GX, GY, GZ, HA, HB, HC, HD, HE, HF, HG, HH, HI, HJ, HK, HL, HM, HN, HO, HP, HQ, HR, HS, HT, HU, HV, HW, HX, HY, HZ, IA, IB, IC, ID, IE, IF, IG, IH, II, IJ, IK, IL, IM, IN, IO, IP, IQ, IR, IS, IT, IU, IV, IW, IX, IY, IZ, JA, JB, JC, JD, JE, JF, JG, JH, JI, JJ, JK, JL, JM, JN, JO, JP, JQ, JR, JS, JT, JU, JV, JW, JX, JY, JZ, KA, KB, KC, KD, KE, KF, KG, KH, KI, KJ, KK, KL, KM, KN, KO, KP, KQ, KR, KS, KT, KU, KV, KW, KX, KY, KZ, LA, LB, LC, LD, LE, LF, LG, LH, LI, LJ, LK, LL, LM, LN, LO, LP, LQ, LR, LS, LT, LU, LV, LW, LX, LY, LZ, MA, MB, MC, MD, ME, MF, MG, MH, MI, MJ, MK, ML, MM, MN, MO, MP, MQ, MR, MS, MT, MU, MV, MW, MX, MY, MZ, NA, NB, NC, ND, NE, NF, NG, NH, NI, NJ, NK, NL, NM, NN, NO, NP, NQ, NR, NS, NT, NU, NV, NW, NX, NY, NZ, OA, OB, OC, OD, OE, OF, OG, OH, OI, OJ, OK, OL, OM, ON, OO, OP, OQ, OR, OS, OT, OU, OV, OW, OX, OY, OZ, PA, PB, PC, PD, PE, PF, PG, PH, PI, PJ, PK, PL, PM, PN, PO, PP, PQ, PR, PS, PT, PU, PV, PW, PX, PY, PZ, QA, QB, QC, QD, QE, QF, QG, QH, QI, QJ, QK, QL, QM, QN, QO, QP, QQ, QR, QS, QT, QU, QV, QW, QX, QY, QZ, RA, RB, RC, RD, RE, RF, RG, RH, RI, RJ, RK, RL, RM, RN, RO, RP, RQ, RR, RS, RT, RU, RV, RW, RX, RY, RZ, SA, SB, SC, SD, SE, SF, SG, SH, SI, SJ, SK, SL, SM, SN, SO, SP, SQ, SR, SS, ST, SU, SV, SW, SX, SY, SZ, TA, TB, TC, TD, TE, TF, TG, TH, TI, TJ, TK, TL, TM, TN, TO, TP, TQ, TR, TS, TT, TU, TV, TW, TX, TY, TZ, UA, UB, UC, UD, UE, UF, UG, UH, UI, UJ, UK, UL, UM, UN, UO, UP, UQ, UR, US, UT, UY, UZ, VA, VB, VC, VD, VE, VF, VG, VH, VI, VJ, VK, VL, VM, VN, VO, VP, VQ, VR, VS, VT, VU, VV, VW, VX, VY, VZ, WA, WB, WC, WD, WE, WF, WG, WH, WI, WJ, WK, WL, WM, WN, WO, WP, WQ, WR, WS, WT, WU, WV, WW, WX, WY, WZ, XA, XB, XC, XD, XE, XF, XG, XH, XI, XJ, XK, XL, XM, XN, XO, XP, XQ, XR, XS, XT, XU, XV, XW, XX, XY, XZ, YA, YB, YC, YD, YE, YF, YG, YH, YI, YJ, YK, YL, YM, YN, YO, YP, YQ, YR, YS, YT, YU, YV, YW, YX, YY, YZ, ZA, ZB, ZC, ZD, ZE, ZF, ZG, ZH, ZI, ZJ, ZK, ZL, ZM, ZN, ZO, ZP, ZQ, ZR, ZS, ZT, ZU, ZV, ZW, ZX, ZY, ZZ.

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**From:** oetech@fccsun07w.fcc.gov  
**Sent:** Monday, October 30, 2000 4:30 PM  
**To:** jcohen@wbklaw.com

**To:** Jeffrey Cohen, Wilkinson Barker Knauer, LLP  
**From:** Joe Dichoso  
jdichoso@fcc.gov  
FCC Application Processing Branch

**Re:** FCC ID F9CCMM1102  
**Applicant:** Schlumberger Resource  
Management Services Inc.  
**Correspondence Reference Number:** 16846  
**731 Confirmation Number:** EA98833

- 1) Please provide all items required by Section 2.933.
- 2) Provide external photo's of the device and all antennas.
- 3) Indicate compliance with the new RF safety requirements, place the exhibit in the RF exposure info folder of the electronic filing.

The items indicated above must be submitted before processing can continue on the above referenced application. Failure to provide the requested information within 60 days of the original e-mail date may result in application dismissal pursuant to Section 2.917 (c) and forfeiture of the filing fee pursuant to section 1.1108.

DO NOT reply to this e-mail by using the Reply button. In order for your response to be processed expeditiously, you must upload your response via the Internet at [www.fcc.gov](http://www.fcc.gov), Electronic Filing, OET Equipment Authorization Electronic Filing. If the response is submitted through Add Attachments, in order to expedite processing, a message which informs the processing staff that a new exhibit has been submitted must also be submitted via Submit Correspondence. Also, please note that partial responses increase processing time and should not be submitted.