

CORRESPONDENCE

Marstech Limited

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Testing For FCC
Submissions/
Verifications

Engineering &
Administrative



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Approved Test Facility



To: Katie Hawkins **Date:** April 7, 1999
Company: FCC Application **Pages:** 2, including this cover sheet.
Processing Branch
From: Bob Marshall
Reference: 98540D **Correspondence No.:** 6841
Subject: Applicant: Thomson Consumer Electronics Inc.
FCC ID: G9H2-6920M
731 Confirmation No.: EA93110
Date of Original E-Mail: 03/26/99

COMMENTS:

We have resubmitted the corrected 731 Form.

The correct frequencies are:

902.1 - 904.5

925.9 - 927.85

Sorry for the incorrect info.

We trust you will find this satisfactory.

Yours very truly,

Bob Marshall
E-mail bob@marstechltd.com

1.(a) Instead of Applicant, FCC is authorized to mail original Grant to: *(see instructions)*Firm name,
number, street,
City, State/Country,
ZIP/Postal Code

(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)

| | | |
|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 2.(a) Technical contact: Firm name, contact person, number, street, City, State/Country, ZIP/Postal Code | Marstech Limited Mr. Robert G. Marshall, P. Eng. 11 Kelfield Street Etobicoke, Ontario CANADA M9W 5A1 | (b) Telephone No. (Area/Country/City code, No. and Ext.) (416) 246-1116 |
| | | (c) FAX No. (Area/Country/City code and No.) (416) 246-1020 |

(d) Internet e-mail address: bob@marstechltd.com

| | | |
|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| (e) Non-Technical contact: Firm name, contact person, number, street, City, State/Country, ZIP/Postal Code | Marstech Limited Mr. Robert G. Marshall, P. Eng. 11 Kelfield Street Etobicoke, Ontario CANADA M9W 5A1 | (f) Telephone No. (Area/Country/City code, No. and Ext.) (416) 246-1116 |
| | | (g) FAX No. (Area/Country/City code and No.) (416) 246-1020 |

(h) Internet e-mail address: bob@marstechltd.com

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 ☒ No4 Does the applicant desire the Commission to defer grant of this application pursuant to 47 CFR §0.457 (d) (1) (ii)? *(See instructions)* ☐ Yes ☒ No5 Type of equipment authorization requested (check *one* box only): ☒ Certification ☐ Type Acceptance ☐ Notification

| | |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| 6.(a) Equipment Code and description: <i>(See instructions, page 4)</i> ETS (900MHz Low Power Analog Cordless Telephone) | (b) Equipment will be operated under FCC Rule Part(s): 47 CFR Part 15 |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|

| | | |
|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| 7. Application is for: (Check one box only) | | <input type="checkbox"/> 3. Class II permissive change or modification of presently authorized equipment. <i>(See instructions)</i> |
| <input checked="" type="checkbox"/> 1. Original equipment <i>(See instructions)</i> | <input type="checkbox"/> 2. Change in identification of presently authorized equipment | |
| ORIGINAL FCC ID | | Grant date |

| 8. EQUIPMENT SPECIFICATIONS: <i>(See instructions)</i> | | | | |
|--------------------------------------------------------|------------------------------------|------------------------------------|------------------------------------------------------------------|---------------------------------|
| (a) Frequency range in MHz | (b) Rated RF power output in watts | (c) Frequency tolerance %, Hz, ppm | (d) Emission designator <i>(See 47 CFR §2.201 and §2.202)</i> | (e) Microprocessor model number |
| 902.1 - 904.5MHz (Base) | | | F3E | IC26920 |
| 925.9 - 927.85MHz (Handset) | | | F3E | IC26920 |

9. Is the equipment in this application:

(a) A composite device subject to more than one type of 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)*

COMPLETE, SIGN and DATE Page 3