

Timco Engineering, Inc.

TCB Application Form 731

Rev 21 March 09

For Timco Use Only	
Job Number	
Scope	
Date Filed	
Conf. #	
Grant Note	

Shaded areas are REQUIRED

Item 1. Applicant's complete, legal business name:

Motorola Mobility, Inc.

Applicant's FCC Registration Number (FRN): 0004-3213-11

Item 2. Applicant's mailing address: *fill in fields, as appropriate*

Line 1: 222 Merchandise Mart Plaza, Suite 1800

Line 2: Mail Stop 18F05

KDB Tracking #:

City: Chicago

State:

Illinois

Country (if foreign address):

Zip/Postal Code:

60654

Item 3. Applicant Contact Person:

Must be the same as the FCC Grantee Contact listed in the FCC database. The Name in the FCC Database will be on the Certification.

<https://fjallfoss.fcc.gov/oetcf/eas/reports/GranteeSearch.cfm>

First Name: John

Last Name: Lewczak

Title: Compliance Manager

Telephone: 954-324-7707

E-mail: jlewczak@motorola.com

Fax No.: 954-337-2377

Item 4. FCC ID **Grantee Code:** **Equipment Product Code (14 characters maximum):**

consisting of:

IHD

T56VA5 *include "dashes" (-) where appropriate*

Item 5. Application Contact: **All questions regarding the application will be directed to this contact. The Original Grant and Invoice will be sent to this contact.**

Firm Name:

Motorola Mobility, Inc.

Telephone:

(954) 324-7707

Ext.:

Fax: No.:

(954) 337-2377

First Name: John

Middle Initial:

Last Name: Lewczak

Address Line 1: 222 Merchandise Mart Plaza

P.O. Box:

Address Line 2: Suite 1800

City: Chicago

State: Illinois

Country (if foreign address):

Zip/Postal Code: 60654

E-mail: jlewczak@motorola.com

Telephone:

Fax:

Item 6. Test Firm Used to Take Measurements:

Firm Name:

Sporton International, Inc.

Telephone:

+886-3-3273456

Ext.:

Fax No.:

+886-3-3284978

First Name: Jones

Middle Initial:

Last Name: Tsai

Address Line 1: No. 52, Hwa Ya 1st Rd.

P.O. Box:

Address Line 2: Hwa Ya Technology Park

City: Kwei-Shan District

State:

Country (if foreign address): Taiwan ROC

Zip/Postal Code:

E-mail: Jones.Tsai@sporton.com

FCC Registered Test Site Number. *Required for Part 15 and 18 applications.*

TH02-HY / CO05-HY / 03CH07-HY

Item 7.

* Does this application include a request for **SHORT-TERM** confidentiality for any portion(s) of the data contained in this application pursuant to FCC DA 04-1705 dated 6/15/2004?

SHORT-TERM request:

Yes No

45 days 90 days 180 days

* 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?

PERMANENT request:

Yes No

Request for Grant Deferral

Yes:

No:

Date:

Item 8. *Is this application for modular approval? Yes No

Modular Type: *(only complete if you answered Yes to Item 8)*

Single Modular Approval

Split Modular Approval

Limited Single Modular Approval

Limited Split Modular Approval

Item 9. *Is this application for software defined radio authorization? Yes No

814.7	823.3	0.156	0.01	ppm	1M10W7D	90	HC
816.5	821.5	0.201	0.01	ppm	4M50G7D	90	HC
819.0	819.0	0.200	0.01	ppm	8M97G7D	90	HC
819.0	819.0	0.151	0.01	ppm	8M95W7D	90	HC
824.7	848.3	0.070	0.01	ppm	1M10W7D	22H	HC
826.5	846.5	0.112	0.01	ppm	4M48G7D	22H	HC
831.5	841.5	0.110	0.01	ppm	13M4G7D	22H	HC
831.5	841.5	0.069	0.01	ppm	13M4W7D	22H	HC
824.7	848.3	0.071	0.01	ppm	1M10W7D	22H	HC
829.0	844.0	0.122	0.01	ppm	9M03G7D	22H	HC
829.0	844.0	0.070	0.01	ppm	9M03W7D	22H	HC
1712.4	1752.6	0.271	0.01	ppm	4M13F9W	27	HC
1710.7	1754.3	0.224	0.004	ppm	1M10W7D	27	HC
1717.5	1747.5	0.279	0.004	ppm	13M5G7D	27	HC
1720.0	1745.0	0.252	0.004	ppm	18M4G7D	27	HC
1720.0	1745.0	0.192	0.004	ppm	18M3W7D	27	HC
1850.2	1908.8	1.466	0.006	ppm	245KGXW	24E	HC
1850.2	1908.8	0.630	0.029	ppm	247KG7W	24E	HX
1852.4	1907.6	0.469	0.021	ppm	4M13F9W	24E	HC
1851.25	1908.75	0.615	0.011	ppm	1M27F9W	24E	HC
1850.7	1909.3	0.331	0.01	ppm	1M09W7D	24E	HC
1857.5	1902.5	0.552	0.01	ppm	13M4G7D	24E	HC
1860.0	1900.0	0.482	0.01	ppm	18M3G7D	24E	HC
1860.0	1900.0	0.297	0.01	ppm	18M3W7D	24E	HC
1857.5	1907.5	0.592	0.01	ppm	13M4G7D	24E	HC
1857.5	1907.5	0.325	0.01	ppm	13M4W7D	24E	HC
1860.0	1905.0	0.506	0.01	ppm	18M2G7D	24E	HC
1860.0	1905.0	0.320	0.01	ppm	18M3W7D	24E	HC
2501.0	2685.0	0.299	0.01	ppm	9M07G7D	27C	HC
2501.0	2685.0	0.165	0.01	ppm	9M05W7D	27C	HC
2506.0	2680.0	0.246	0.01	ppm	18M5G7D	27C	HC
2506.0	2680.0	0.154	0.01	ppm	18M4W7D	27C	HC
2507.5	2562.5	0.431	0.01	ppm	13M5G7D	27C	HC
2510.0	2560.0	0.395	0.01	ppm	18M4G7D	27C	HC
2510.0	2560.0	0.245	0.01	ppm	18M3W7D	27C	HC

Equipment Authorization Waiver *

Is there an equipment authorization waiver associated with this application?

Yes No

If there is an equipment authorization waiver associated with this application, has the associated waiver been approved and all information uploaded?

Yes No

(Continued on Next Page)

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. TITLE 47, SECTION 503).

Item 15. 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 TCB, under the authority of 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.

If different from Applicant's contact (Item 3) you must supply a Letter of Authorization. This authorization letter must be signed by the applicant / grantee (Item 3). The authorization letter MUST name the person that they are authorizing to sign on their behalf.

***Signature of Authorized Applicant:**  (Must be actual signature)

*** Name & Title of Authorized Signature:** John Lewczak; Manager, Regulatory Compliance(Typed)

***Company Name of Person Signing Application:** Motorola Mobility, Inc.

NOTE: An asterisk "*" preceding a field indicates it must be completed.

Instructions for completing the Timco Engineering, Inc. TCB Application Form 731

All Shaded areas are required

Item 1, Item 2 and Item 3:

Please complete these sections with the APPLICANT'S contact information. This information will be verified against the information listed in the FCC's database. Changes in Applicant contact information must be handled separately with the FCC. Contact us if changes to the Applicant's information is necessary.

Item 4:

Please enter the FCC ID of the device. The FCC ID consists of the 3-digit Grantee Code and an Equipment Product Code. The Equipment Product Code may consist of up to 14 characters and may contain "dashes" (-). Please remember to use dashes when appropriate.

Item 5:

Application Contact - This is Timco's customer. **Only one contact is acceptable:** the organization that submits the application. All correspondence regarding the application will be directed to this contact. When issued, the original Grant and Invoice will be sent to this contact. This contact may not always be the test lab that performed the testing of the device. This contact may be a third-party agent or the Applicant itself. Please complete all areas.

Item 6:

Please indicate the name and location of the Test Laboratory where the testing took place. Please also identify the Test Lab's contact person and their contact information. For Part 15 and Part 18 applications please record the FCC registered test site number.

Item 7:

Please indicate if a request for confidentiality of certain exhibits is requested with this application. You now can choose between short-term confidentiality or permanent confidentiality. Short-term confidentiality is described in FCC DA 04-1705 dated 6/15/04. A separate cover letter exhibit must be submitted with the application explaining either request for confidentiality. This cover letter must refer to the correct FCC Rules that govern confidentiality, must indicate which exhibits confidentiality is requested for and must provide adequate reason for the request. Additional fees apply.

Item 8:

Please indicate if the application is for modular approval. If yes, please justify the modular type and a separate cover letter must be submitted addressing the modular approval requirements of FCC 15.212.

Item 9:

Please indicate if the application is for authorization of a software-defined radio.

Item 10:

Please provide the 3-digit Equipment Class. Examples of Equipment Classifications include "DXX" for Part 15 Low Power Communication Device Transmitter and "8CC" for Part 18 Consumer Device (different Equipment Classifications may apply for your device). Please provide a brief description of the device. The description that you enter here will appear on the final Grant of Equipment Authorization. (example: 3G Cell phone, laptop with WiFi and Bluetooth, remote control for toy, or garage door opener, etc.)

Item 11:

Please indicate what type of application is being submitted. With applications for a Change in ID of Previously Authorized Equipment or a Class II Change, a separate cover letter exhibit explaining the details of the change must accompany the application.

Item 12:

Please indicate if the equipment in this application is a composite device or part of a system. Complete Item 12c only if you check "Yes" in Items 12a or 12b.

Item 13:

Please indicate the FCC Rule Part(s) that the equipment will be operated under.

Item 14:

Please complete the appropriate sections for the Equipment Specifications.

Item 15:

Please affix the signature and Title of the authorized Applicant.