



ITRONIX®

801 S. STEVENS STREET
SPOKANE, WA 99204

509.624.6600
800.441.1309
FAX 509.626.4203
www.itronix.com

Attn: Director of Certification

Authority to Act as Agent

I appoint Rod Munro of Spectrum Technology Inc to act as our agent in the preparation of this application for equipment certification. I certify that submitted documents properly describe the device or system for which equipment certification is sought. I also certify that each unit manufactured, imported or marketed, as defined in Industry Canada's regulations will have affixed to it a label identical to that submitted for approval with this application.

For instances where our authorized agent signs the application for certification on our behalf, I acknowledge that all responsibility for complying with the terms and conditions for Certification, as specified by American TCB, still resides with ITRONIX CORPORATION 801 South Stevens Street Spokane, WA 99204

Dated this 22 day of July, 2004.

Agency Agreement Expiration Date: (Typically 8-12 months)

By:  Richard G. Sargent
(Signature) (Print name)

Title: Sr. Manager Services

On behalf of: ITRONIX CORPORATION
(Company Name)

Telephone: 509-742-1253