Declaration of Authorization

We Name: Address: City: Country:	Paradox Security Systems Ltd. 780 Industriel Blvd Saint-Eustache, Quebec J7R 5V3 Canada
Declare that:	
Name Representativ Agent Company nam Address: City: Country	e of agent:
is authorized to apply for Certification of the following product(s):	
•	Wireless control panel board MG5075ParadoxAugust 17, 2021
on our behalf.	
Date:	August 17, 2020
City:	Saint-Eustache
Name:	Alex Chaplik ⁽²⁾
Function:	Certification manager
Signature:	Afec

Notes:

^{(1):} Required for FCC application

^{(2):} For FCC it must be the Grantee Code "owner" or the authorized agent.