

(On manufacturer's company letter heading)

Declaration of Authorization

We

Name: Paradox Security Systems Ltd.
 Address: 780 Industriel Blvd
 City: Saint-Eustache, Quebec J7R 5V3.....
 Country: Canada

Declare that:

Name Representative of agent: (1)
 Agent Company name: Hermon Laboratories Ltd.....
 Address: Harakevet Industrial Zone
 City: Binyamina 30500.....
 Country: Israel

is authorized to apply for Certification of the following product(s):

Product description: Indoor Wireless PIR detector with Anti Mask and Pet Immunity
 Type designation: NV75MR.....
 Trademark: Paradox.....
 Validity/ expiry date

on our behalf.

Date: January 3, 2017..
 City: Saint-Eustache
 Name: Nimrod Herman (2)
 Function: Certification manager

Signature: 

Notes:

- (1): Required for FCC application
- (2): For FCC it must be the Grantee Code "owner" or the authorized agent.