## FEDERAL COMMUNICATIONS COMMISSION - FCC FORM 731 APPLICATION FOR EQUIPMENT AUTHORIZATION

Approved by OMB 3060 - 0934 Expires 02/28/2005

Item 1. Applicant's complete, legal business name: Kid Galaxy Ir	nc.			
Item 2. Applicant's mailing address				
Line 1: One Sundial Ave, Suite 310 Manchester,				
Line 2:				
P.O.Box:				
City:				
State:				
Country (if foreign address): United States	Zip/Postal Code: NH 03103			
<u>Item 3.</u> FCC ID: Grantee code: QEA				
Equipment Product Code (14 characters maximum): CASTER27				
<u>Item 4.</u> Person at the applicant's address to receive grant or for				
First Name: KC	Mail Stop:			
Last Name: Lee	Telephone: 852 26661807	Ext:		
Title: Manager	For No.			
E-mail: kc_lee@hkstc.com	Fax No:			
<u>Item 5.</u> Instead of Applicant, the original Grant is authorized to be The Hong Kong Standards and Testing Centre Ltd.	be mailed to:			
10 Dai Wang Street, Tai Po Industrial Estate, N.T., Hong Kong.				
Contact: KC Lee				
E-mail: kc_lee@hkstc.com				
Item 6. Technical Contact:				
Firm Name: The Hong Kong Standards and Testing Centre Ltd.	Telephone: 852 26661807 E	xt:		
	Fax No: 852 2665 0848			
First Name: KC Middle Initial:	Last Name: Lee			
Address Line 1: 10 Dai Wang Street,	P.O.Box:			
Address Line 2: Tai Po Industrial Estate	City:			
Country (if foreign address): Hong Kong	Zip/Postal Code:			
E-mail: kc_lee@hkstc.com				
Item 7. Non-Technical Contact:	T-l	4-		
Firm Name: The Hong Kong Standards and Testing Centre Ltd.	Telephone: 852 26661807 E Fax No: 852 2665 0848	xt:		
First Name: KC Middle Initial:	Last Name: Lee			
Address Line 1: 10 Dai Wang Street,	P.O.Box:			
Address Line 2: Tai Po Industrial Estate	City:			
Country (if foreign address): Hong Kong	Zip/Postal Code:			
E-mail: kc_lee@hkstc.com	p			
Item 8. * Does this application include a request for confidential	ity for any portion(s) of the	(please mark as		
data contained in this application pursuant to 47 CFR § 0.459 of	the Commission Rules?	appropriate)		
If "Yes" see instructions.		× No		
Item 9. Does the applicant request that the Commission defer gr	rant of this application pursuant	t 47 CFR § 0.457(d)(1)(ii)?		
(See instructions)				
If so, specify date when grant may be issued (MM/DD/YYYY form	nat):			
Item 10.				
* Equipment Class: DXX				
* Description of Product as it is Marketed: Part 15 Low Power Co	emmunication Dovice Transmitter			
(NOTE: Shadow Caster - Mirager)	offill diffication bevice transmitter			
Item 11. * Application is for: (please mark as appropriate)				
× Original Equipment (See instructions)				
O Change in identification of presently authorized equipment: Original FCC ID:				
2go	Grant Date (MM/DD/YYYY	format):		
O Class II permissive change or modification of presently				
Class ii perillissive change or illoullication or bresentiv	authorized equipment (See ins	tructions)		
Class if permissive change of modification of presently	authorized equipment (See ins	tructions)		
Class if permissive change of mounication of presently	authorized equipment (See ins	tructions)		

Item 12. Is the equipment in this application:  * (a) a composite device subject to an additional equipment authorization?	O Yes	× No
* (b) part of a system that operates with, or is marketed with, another device that requires an	O Yes	× No
equipment authorization?		
If either of the above questions is answered "Yes" complete section 12(c).		

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/a\ The related coefficient				FOO ID
(c) The related application:				FCC ID
O has been granted un	der the FC	C ID listed to the right		
O is in the process of b	peing filed	under the FCC ID listed to the	he right	
O is pending with the F	CC under	the FCC ID listed to the righ	t	
Item 13. Name of test firm an	d contact p	erson on file with the FCC,	if different from applicant or contact po	erson:
Firm Name: The Hong Kong S	standards &	Testing Centre Ltd.	Last Name: KC	
<b>Telephone 26661852</b>	Ext	Fax No. 26650848	E-mail: kc_lee@hkstc.com	
Item 14. Enter any text that ve	il bluow uo	ke to appear at the bottom o	of the Grant of Equipment Authorization	n.

item 14. Enter any text that you would like to appear at the bottom of the Grant of Equipment Authorization.

Read each certification carefully before answering and signing this application

## **Equipment Specifications:**

Rule Part	Frequency Range (MHz)	Power (W)	Frequency Tolerance and Units	Emission Designator	Note Codes
15	27.145				

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTITUTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

## Item 15. \*SECTION 5301 (ANTI-DRUG ABUSE) CERTIFICATION:

The applicant must certify that neither the applicant nor any party to the application is subject to a denial of Federal benefits, that include FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862 because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the definition of a "party" for these purposes.

Does the applicant or authorized agent so certify? X Yes 0 No

## Item 16. APPLICANT/AGENT CERTIFICATION:

I certify that I am authorized to sign this application. All of the statements here in 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 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.

\* Signature of Authorized Person Filing: Title of authorized signature: TCB Administrator Marie Ann Confroy Complete items below if an agent signs the application Firm Name: The Hong Kong Standards and Testing Centre Ltd. Address Line 1: 10 Dai Wang Street, P.O.Box: Address Line 2: Tai Po Industrial Estate, N.T. Country (if foreign address): Hong Kong Zip/Postal Code: Person at above address to receive Grant: First Name: KC Last Name: LEE Title: Manager Mail Stop:

NOTE: An asterisk '\*' preceding a field indicates it must be completed before this application can be submitted.

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