## 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:	Motorola Inc. Mesh Networks Products Group
IA O AP	LIE>U INELMOIT) LIDEMICED FLADITA
Item 2. Applicant's mailing address	
Line 1: 485 Keller Rd. Line 2: Suite 250	
P.O.Box:	
City: Maitland State: FL	
•	Zip/Postal Code: 32751
Country (if foreign address):	
Item 3. FCC ID: QJE Grantee code: A	P30490705
Equipment Product Code (14 characters maximum):	
Item 4. Person at the applicant's address to receive grant of	
First Name: Jeff	Mail Stop:
Last Name: Schmidt	Telephone: 407 659 -5318 Ext:
Title: Manager, Product Design	107 159 -591
Title: Manager, Product Design E-mail: jeff.c. schmidt@ motorola, Com	Fax No: 407 659 -5301
Item 5. Instead of Applicant, the original Grant is authorize	ed to be mailed to:
	117 640 -M ID
Item 6. Technical Contact:	407 659.53 18
Firm Name: Motorola	Telephone: Ext: Fax No:
First Name: Jeff Middle Initial:	Last Name: Schmidt
Address Line 1: 485 Keller Rd	P.O.Box:
Address Line 2: Suite 250	City: Majtland
Country (if foreign address):	Zip/Postal Code: FL 3275)
E-mail: jeff.c. schmidt @ motorola, con	M
Item 7. Non-Technical Contact:	407 659 5364 Telephone: Ext: Fax No:
Firm Name: Motorola	Telephone: Ext: Fax No:
First Name: De Middle Initial:	Last Name: Ham://a
Address Line 1: 485 Keller Rd	P.O.Box:
Address Line 2: Suite 250	City: Meitland FL Zip/Postal Code: 32751
Country (if foreign address):	Zip/Postal Code: 3275/
E-mail: joe.hamilla @ motorola, com	
Item 8. * Does this application include a request for confid	dentiality for any portion(s) of the (please mark as
data contained in this application pursuant to 47 CFR § 0.	
If "Yes" see instructions.	
Item 9. Does the applicant request that the Commission d	efer grant of this application pursuant 47 CFR § 0.457(d)(1)(ii)?
(See instructions)	
If so, specify date when grant may be issued (MM/DD/YY)	(Y format):
Item 10.	Janes Took State.
* Equipment Class: 1)15,14a /	vansmissin System
* Description of Product as it is Marketed: Wireless	Modern
(NOTE: This text will appear below the equipment class of	
Item 11. * Application is for: (please mark as appropriate)	
Original Equipment (See instructions)	in
O Change in identification of presently authorized	equipment: Original FCC ID: Grant Date (MM/DD/YYYY format):
O Class II permissive change or modification of pre	esently authorized equipment (See instructions)

Item 12. Is the equipment in this application:

\* (a) a composite device subject to an additional equipment authorization?

\* (b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization?

If either of the above questions is answered "Yes" complete section 12(c).

O has been g	ication:				FCC ID
O 1= 1= 41	ranted under the FCC	ID listed to the right	t		
O is in the pr	ocess of being filed u	nder the FCC ID liste	ed to the right		
O is pending	with the FCC under the st firm and contact pe	reon on file with the	e right FCC if different from	applicant or conta	ct person:
<u>Item 13.</u> Name of te Firm Name:	st iirm and contact pe	nson on me with the	Last N	ame:	ar haragen
elephone Ext Fax No. E-mail:					
			<del></del>		
				F	
Item 14. Enter any f	text that you would lik	e to appear at the bo	ottom of the Grant of	Equipment Authoriz	ation.
					•
R	ead each certification	n carefully before	answering and sig	ning this applicati	ion
<b>Equipment Spec</b>	ifications:				
	F		Frequency	Emission	
Rule Part	Frequency	Power (W)	Tolerance and	Designator	Note Codes
	Range (MHz)		Units	Dealghator	
15,90	4945 -4985	123dBm	10 ppm	FID	
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