(Print this on your official headed company note paper.

## **Power of Attorney**

Name or model type of

the Specified Radio Equipment:

Bomag Field Protect Transponder

Bomag Field Protect Control

Applicant's company name:

TeraTron GmbH

Applicant's company address:

Bunsenstr. 10

DE-51647 Gummersbach

Applicant's name:

Rainer Helberg

Date and Applicant's Signature:

26.09.11. R-

Job Title and Department:

Project Manager/ Development

It is necessary, that the person registered witht FCC, signs this form.

I hereby authorize the following person as a representative and all rights regarding the application to obtain Type Certification for the Specified Radio Equipment (mentioned above) are delegated.

Attorney's Company name:

m. dudde hochfrequenz-technik

Attorney's Company address:

Rottland 5 a

51429 Bergisch Gladbach

Attorney's Name:

Mr. Andreas Morsbach

Mrs. Anja Hittig-Rademacher

Date and Attorney's Signature:

2012-03-26

Job Title and Department:

homologation department