

Curtis- Straus LLC FCC Form 731 Application

For TCB Use Only			
Received date			
CS#			
Scope			
Grant Note			

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

before this application can be sub-	intica.				
*Applicant's FCC Registration Numb *FCC Registered Test Site Number (and 18 applications Part 1	15		
· FCC Registered Test Site Number (OATS). Required for Part 13 a	ind 18 applications. Fart	13		
Item 1. *Applicant's complete, legal	business name:				
Xirrus, Inc.					
<u>Item 2. *Applicant's mailing addre</u>					
Line 1: 2101 CORPORATE CENTE	R DR				
Line 2:					
P.O. Box:					
City: THOUSAND OAKS					
State:	Country (if foreign address):		Zip/Postal	l Code:	
California	United States		91320		
Item 3. *FCC ID Grantee Code: S			um): -XR630		
Item 4. *Person at the applicant's a					
First Name: Steve		Stop:			
	Last Name: Krattiger Telephone: 805-262-1685 Ext:				
Title: Director Hardware Engineering	Fax I	No.: 805-262-1601			
E-mail: steve.krattiger@xirrus.com					
Item 5. *Instead of Application, FC					
Firm Name: Bureau Veritas Consume	er Products Services (H.K.) Ltd	I., Taoyuan Branch			
Address Line 1: No. 19, Hwa Ya 2nd	Rd., Kwei Shan Hsiang	P.O.Box:			
Address Line 2:	-	City: Taoyu	an Hsien S	State:	
Country: Taiwan, R.O.C.		Zip/Postal C	Zip/Postal Code: 333		
Person at above address to receive	Grant:				
First name: Andrea		Last Name: 1	Last Name: Hsia		
Title: Senior Specialist			Mail Stop:		
Item 6. *Technical Contact:					
Firm Name: Bureau Veritas Consume	er Products Services (H.K.) Ltd	I., Taoyuan Branch	Tel: 886 3 318	3232Ext: 1608	Fax:
886 3 327 0892					
First Name: Robert	Middle Initial:	Last Name: 1	Huang		
Address Line 1: No. 19, Hwa Ya 2nd	Rd., Kwei Shan Hsiang	P.O. Box:			
Address Line 2:			an Hsien	State:	
Country (if foreign address): Taiwan,		Zip/Postal C	ode: 333		
E-mail: robert.huang@tw.bureauveri	tas.com				

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<u>Item 7.</u> *Non-Technical Contact:			
Firm Name: Bureau Veritas Consumer Products Services (H.K.) Ltd., Taoyuan Fax: +886 3 327 0892	Branch Tel: +88	36 3 318 3232 Ext: 1628	
First Name: Andrea Middle Initial:	Last Name: Hsia		
Address Line 1: No. 19, Hwa Ya 2nd Rd., Kwei Shan Hsiang	P.O. Box:		
Address Line 2:	City: Taoyuan Hsien	State:	
Country (if foreign address): Taiwan, R.O.C.	Zip/Postal Code: 333		
E-mail: andrea.hsia@tw.bureauveritas.com	Zip/i ostai Code. 555		
<u>Item 8.</u>			
* Does this application include a request for short-term confidentiality for any	Short-Term request:		
contained in this application pursuant to FCC DA 04-1705 dated 6/15/2004?	Yes No		
		If Yes, Date of Release:	
* Does this application include a request for confidentiality for any portion(s) of the	data contained in this	Permanent request:	
application pursuant to 47 CFR0.459 of the Commission Rules?		Yes No	
Item 9. *Does this applicant request the TCB to perform pre-approval before gr		⊠ No	
If so, specify date when grant may be issued (MM/DD/YYYY) forma	t):		
If so, specify contact's email for pre-approval notice:	<u> </u>		
Item 10. *Is this application for software defined radio authorization? Yes			
Item 10a. *Is this application for Modular Approval authorization?	_		
<u> </u>	Single Modular Appr		
<u> </u>	Limited Modular Ap		
<u> </u>	Split Modular Appro		
	Limited Split Modula	ar Approval	
No. 101 *Ld VDD:		7 5.1	
		No	
Item 11. *Equipment Class: 3-digits required		at alogg on the grount)	
NII (Note: This text will appe	ear below the equipmen	it class on the grant)	
(If composite device, provide one Form 731 per Equipment Class) 802.11ac 3x3 AP			
Item 12. *Application is for:			
Original Equipment			
Change in identification of presently authorized equipment:			
Original FCC ID: Grant Date (MM/DD/Y	VVV)·		
Class II permissive change or modification of presently authorized equipme			
Class III permissive change to software defined radio (Note: this may only be		s pertaining to Software Defined	
Radio)	se med for application	s pertaining to software Bernied	
Item 13.* Is the equipment in this application:			
* (a) a composite device subject to an additional equipment authorization?		⊠ Yes □ No	
* (b) part of a system that operates with, or is marketed with, another device that	at requires an	Yes No	
equipment authorization?			
If either of the above questions is answered "Yes" complete section 13 (c).			
(c) The related application:		FCC ID	
has been granted under the FCC ID listed to the right?		SK6-XR630	
\boxtimes is in the process of being filed under the FCC ID listed to the right?			
is pending with the FCC under the FCC ID listed to the right?			
has a mix of pending and granted statuses under the FCC ID(s) referenced.			
Item 14. *Does this equipment require SAR evaluation? \[\sum \text{Yes} \] No			
Item 15. *Name of test firm and contact person on file with the FCC, if diff	farent from applicant	or contact parson:	
Firm Name: Bureau Veritas Consumer Products Services (H.K.) Ltd., Taoyuan		or contact person.	
First Name: Andrea Last Name: Hsia			
Tel: 886 3 318 3232 Ext: 1628 Fax: +886 3 327 0892	Email: andre	a.hsia@tw.bureauveritas.com	
Read each certification carefully before answering and signing this application			
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHA			
TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION L			
CODE. TITLE 47. SECTION 312 (a) (1)). AND/OR FORFEITURE (L.S. TITLE)			

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<u>Item 16.</u> *SECTION 5301(ANTI-DRUG A The applicant must certify that neither the applicant must certify the applicant must certified the applicant		tion is subject to a denial of F	ederal benefits, that	
include FCC benefits, pursuant to Section 53				
possession or distribution of a controlled sub				
possession of distribution of a controlled suc	/stance. See 17 C1 R 1.2002(8) for t	ne definition of a party for	nese purposes.	
* Does the applicant or authorized agent so				
<u>Item 17</u> . APPLICANT/AGENT CERTIFI	CATION:			
I certify that I am authorized to sign this app to the best of my knowledge and belief. In a the FCC, as a result of the representations m exact FCC ID specified in this application, (the equipment with the applicable technical arrangements have been made with the man the FCC's technical requirements.	ccepting a Grant of Equipment Authade in this application, the applican 2) compliance statement labeling purules. If the applicant is not the actu	norization issued by the TCB, t is responsible for (1) labelin arsuant to the applicable rules all manufacturer of the equipm	under the authority of g the equipment with the , and (3) compliance of nent, appropriate	
Authorizing an agent to sign this application for all statements in this application.	is done solely at the applicant's dis	scretion; however, the applica	nt remains responsible	
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:	Steve Krattiger *Title of Author	rized Signature: Director Har	dware Engineering	
Complete items below if an agent signs the application				
Firm Name: Bureau Veritas Consumer Prod	ucts Services (H.K.) Ltd., Taoyuan	Branch Tel: +886 3 318 3	3232 Ext: 1628	
Fax: +886 3 327 0892	•			
First Name: Andrea Middle Initial:		Last Name: Hsia		
Address Line 1: No. 19, Hwa Ya 2nd Rd., Kwei Shan Hsiang		P.O. Box:		
Address Line 2:		City:	State:	
Country (if foreign address): Taiwan, R.O.C	Zip/Postal Code: 333			
E-mail: andrea.hsia@tw.bureauveritas.com				
NOTE: An asterisk "* "preceding	a field indicates it must be complet	ed before this application can	be submitted.	

Equipment Specifications

<u>Item 18</u> .						
* Equipment will be operated under FCC Rule Part(s): Part 15.407						
<u>Item 18b</u> .						
* EQUIPME	NT SPECIFICAT	IONS:				
Frequency range in MHz		Rated RF	Frequency tolerance		Emission	
		Power output	%, Hz or		Designator (see 47	Microprocessor
Low Freq	High Freq	IN WATTS	Value	ppm	CFR 2.201 and 2.202)	Model number
5260	5320	0.115				
5500	5580	0.116				
5660	5700	0.101				
						<u> </u>
						<u> </u>