

# Savox communications Oy Ab

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Attn: Director of Certification

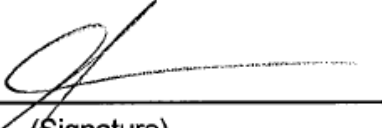
## Authority to Act as Agent

I appoint SGS-CSTC Standards Technical Services Co., Ltd. (SGS) to act as our agent in the preparation of this application for equipment certification. I certify that submitted documents properly describe the device or system for which equipment certification is sought. I also certify that each unit manufactured, imported or marketed, as defined in Industry Canada's regulations will have affixed to it a label identical to that submitted for approval with this application.

For instances where our authorized agent signs the application for certification on our behalf, I acknowledge that all responsibility for complying with the terms and conditions for Certification, as specified by American Certification Body, Inc. (ACB), still resides with Savox Communications Oy Ab, Sinikalliontie 3 B, 02630 Espoo, Finland.

Dated this 10 day of October, 2012.

Agency Agreement Expiration Date: (Typically 8-12 months)

By:  Teemu Halkosaari  
(Signature) (Print name)

Title: Senior product manager

On behalf of: Savox Communications Oy Ab  
(Company Name)

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