

Certification Application Attestation Statements

GIGA-TMS INC. 8F, NO.31, LANE 169, KANG-NING ST.,HSI-CHIH, 22180 NEW TAIPEI CITY, Taiwan

Subject: FCC ID: WXAAC908A

To Whom It May Concern:

Statement for 47 CFR section 2.911(d)(5)(i)

GIGA-TMS INC. certifies that as of the date of the application the equipment for which authorization is sought is not "covered" equipment prohibited from receiving an equipment authorization pursuant to section 2.903 of the FCC rules.

If the equipment for which the applicant seeks authorization is produced by any of the entities identified on the current Covered List, including affiliates or subsidiaries of the named companies, the applicant must include an explanation on why the equipment is not "covered" equipment.

Additional Explanation: <N/A>

Statement for 47 CFR section 2.911(d)(5)(ii)

GIGA-TMS INC.	("the applicant") certifies that, as of the date of the filing of this application,
the applicant	•
□ - is / 図- is r	not ⁽³⁾

identified on the Covered List as an entity producing "covered" equipment.

Date:	may, 3, 2023
City:	NEW TAIPEI CITY
Name ⁽²⁾ :	M.T. WANG
Function:	General Manager
Telephone number:	02 2695-4214
Email address:	mtwang@gigatms.com.tw
Signature:	20 T WANG
	/ / / · VV / 1 · · · · · · · · · · · · · · · · · ·

¹⁻ The Commission's Covered List is published by the Public Safety and Homeland Security Bureau and posted on the Commission's website. This Covered List, which is periodically updated, identifies particular equipment, produced by particular entities, that constitutes "covered" equipment. https://www.fcc.gov/supplychain/coveredlist.

^{(2):} For FCC it must be the Grantee Code "owner" or the authorized agent.

^{(3):} double click on the appropriate box and select "checked" then "OK"



Revision Record Sheet:

Revision	Section	Page	Date	Remark(s)	issued
	number	number			by
01			07-02-2023	1 st version	RvM
02		1	15-02-2023	Changed Applicant to Company	RvdM
				and added "Subject: FCC ID: "	

Issued/modified by : Richard van de Meer Function : Certification assessor

Revision : 02

Date : 15-02-2023

Verified by : Willem Jan Jong
Function : Team Lead
Date : __-02-2023

Released by : Axel Gase

Function : Manager Quality Assurance

Date of release: : __-02-2023