

**SECTION IV - Enter FCC ID from Page 1, Section I**

1.(a) Instead of Applicant, FCC is authorized to mail original Grant to: (See instructions)

Firm name, INTERTEK TESTING SERVICES  
 number, street, 1365 ADAMS COURT  
 City, State/Country, MENLO PARK, CALIFORNIA, U.S.A.  
 ZIP/Postal Code 94025

(b) Name, Title and Mail Stop, if any, of person at above address to receive Grant: (If 1.(a) is completed, this Item must be completed)

DAVID CHERNOMORDIK

2.(a) Technical contact:

Firm name, INTERTEK TESTING SERVICES  
 contact person, DAVID CHERNOMORDIK  
 number, street, 1365 ADAMS COURT  
 City, State/Country, MENLO PARK, CALIFORNIA, U.S.A.  
 ZIP/Postal Code 94025

(b) Telephone No. (Area/Country/City code, No. and Ext.)

(650) 463-2900

(c) FAX No. (Area/Country/City code and No.)

(650) 463-2910

(d) Internet e-mail address:

(e) Non-Technical contact:

Firm name, Mitsubishi  
 contact person, Kelly McKaen  
 number, street, 5255 Mira Sorrento Pl.  
 City, State/Country, San Diego CA 92121  
 ZIP/Postal Code

(f) Telephone No. (Area/Country/City code, No. and Ext.)

(g) FAX No. (Area/Country/City code and No.)

(h) Internet e-mail address:

3. Does this application include a request for confidentiality for any portion(s) of the data contained in this application pursuant to 47 CFR §0.459 of the Commission's Rules? If "Yes" see instructions.

☒ Yes

☐ No

4. Does the applicant request that the Commission defer grant of this application pursuant to 47 CFR §0.457(d)(1)(ii)? (See instructions)

☐ Yes

☒ No

5. Type of equipment authorization requested: (check one box only)

☒ Certification

☐ Type Acceptance

☐ Notification

6.(a) Equipment Code and description: (See instructions, page 4)

**PCE** Part 24 licensed portable Tx help to ear (TDA/AMPS cellular phone)

(b) Equipment will be operated under FCC Rule Part(s): - 24, 22

7. Application is for: (Check one box only)

☐ 1. Original equipment  
 (See instructions)

☐ 2. Change in identification of presently authorized equipment

☐ 3. Class II permissive change or modification of presently authorized equipment  
 (See instructions)

ORIGINAL FCC ID

Grant date

8. EQUIPMENT SPECIFICATIONS: (See instructions)

(a) Frequency range in MHz

(b) Rated RF power output in watts

(c) Frequency tolerance % , Hz, ppm

(d) Emission designator (See 47 CFR §2.201 and §2.202)

(e) Microprocessor model number

824.04-848.97

0.389 W

0.2 ppm

40K0FEW

N/A

824.04-848.97

0.389 W

0.2 ppm

40K0F1D

N/A

824.04-848.97

0.431 W

0.2 ppm

30K0DXW

N/A

1850-1910

0.479 W

0.2 ppm

30K0DXW

N/A

9. Is the equipment in this application:

(a) a composite device subject to more than one type of equipment authorization?

☐ Yes

☒ No

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

☐ Yes

☒ No

If either of the above questions is answered "Yes" complete items 10.(a) and (b). (See instructions)

COMPLETE, SIGN and DATE Page 3

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March 1997