

# FCC Part 15D – Compliance Information

## EUT AND PRODUCT INFORMATION

<b>Type of Equipment</b>	UPCS (DECT 6.0)
<b>Applicant Name</b>	Ascom (Sweden) AB
<b>Address</b>	Grimbodalen 2, 40276 Gothenburg, Sweden
<b>Contact</b>	

	FP	PP	Repeater
EUT Type/System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FCC ID	BXZIPBS2		
Model name	IPBS2		
HW Version	3S110614		
SW Version	DVL5-2012		
Max antenna Gain	+0.6 dB		
Can the EUT be Initiating Device	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
Does the EUT transmit signaling channels	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
Max number of slots in use simultaneously	12		
Test standard:	<input checked="" type="checkbox"/> FCC part 15D	<input type="checkbox"/> Other: IC RSS-213, Issue 2	
Frequency Band	1921.536 – 1928.448 MHz		
# of RF Channels	5		
Frame Period	10 ms		
Max. Burst length			
Min. Burst Length			
# of Logical Channels	60 (12 duplex channels per RF carrier)		
Operating Mode	<input type="checkbox"/> Simplex	<input checked="" type="checkbox"/> Duplex	

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ANTENNAS				
Base (FP)	Antenna	Type	Internal	External
	1		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	3		<input type="checkbox"/>	<input type="checkbox"/>
	4		<input type="checkbox"/>	<input type="checkbox"/>
Does RX and TX use the same antenna(s)?			<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Handset (PP)	Antenna	Type	Internal	External
	1		<input type="checkbox"/>	<input type="checkbox"/>
	2		<input type="checkbox"/>	<input type="checkbox"/>
Does RX and TX use the same antenna(s)?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

ANTENNA DIVERSITY			
	Antenna	Diversity Supported	
		TX	RX
Base (FP)	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	3	<input type="checkbox"/>	<input type="checkbox"/>
	4	<input type="checkbox"/>	<input type="checkbox"/>
Handset (PP)	1	<input type="checkbox"/>	<input type="checkbox"/>
	2	<input type="checkbox"/>	<input type="checkbox"/>

VOLTAGE AND TEMPERATURE RANGES			
VOLTAGES	FP	PP	Repeater
Nominal Voltage	48 V DC		
Cut-Off Voltage (if applicable)			
POWER SOURCE	Type	Manufacturer	
Base or Repeater	PoE		
Handset (PP) (charger)			
Data Connections	<input type="checkbox"/> PSTN <input checked="" type="checkbox"/> Others (please specify): Ethernet		

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ANCILLARY EQUIPMENT	
Description	
Type	
Manufacturer	

HOST DEVICE	
Description	
Type	
Manufacturer	

<b>ADDITIONAL INFORMATION</b>

## FCC Part 15D – Compliance Information

### MANUFACTURERS DECLARATIONS

#### FCC part 15.323 (c)(5)

No device or group of co-operating devices located within 1m of each other shall during any frame period occupy more than 6 MHz of aggregate bandwidth, or alternatively, more than one third of the time and spectrum windows defined by the system.

Applicant Agrees

☒ Yes

☐ No

#### FCC part 15.323 (c)(10)

The applicant hereby declares that the system in this application **does** use the criteria of (c)(10) of this section.

Applicant Agrees

☒ Yes

☐ No

#### FCC part 15.323 (c)(11)

The applicant hereby declares that system in this application **does not** use the criteria of (c)(11) of this section.

Applicant Agrees

☒ Yes

☐ No

#### FCC part 15.323 (c)(12)

The provisions of (c)(10) or (c)(11) of this section **shall not** be used to extend the range of spectrum occupied over space or time for the purpose of denying fair access to spectrum to other devices.

Applicant Agrees

☒ Yes

☐ No

#### FCC part 15.307 (b)

The Applicant is a participating member of UTAM, Inc. and will provide an affidavit from UTAM, Inc. certifying this.

Confirmed By Applicant

☒ Yes

☐ No

#### ADDITIONAL REMARKS:

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#### DECLARED BY:

2011-10-06

Lena Kindmark

Date

Name (print)

  
Signature