



3356 North San Marcos Place, Suite 107  
Chandler, Arizona 85224-1571  
(602) 926-3100, FAX: 926-3598  
[www.goodnet.com/~mfлом](http://www.goodnet.com/~mfлом)

PLEASE NOTE:

ZIP CODE CHANGED TO 85225-1571

NEW PHONE NO. (480) 926-3100 NEW FAX: (480) 926-3598  
NEW ELECTRONIC ADDRESSES: [www.mfлом.com](http://www.mfлом.com) [general@mfлом.com](mailto:general@mfлом.com)

October 11, 1999.

Federal Communications Commission,

Applicant: DPI (H.K.) LTD.  
Equipment: FCC ID: M2UFRS-200 EA95168

Gentlemen:

The following attachments should form part of this application, i.e.

1. Amended Page 2 of Form 731, showing the same P.O. as for MUSICAL ELECTRONICS LTD., on which latter application this present one is based.
2. Photographs - these were not submitted with the original application.

We trust the foregoing meets the requirements of the Commission.

Thank you

MARTHA FLOM, Office Manager

mgf  
encs.

CC: Applicant  
CC: A2LA Corrective Action File

## 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,  
number, street,  
City, State/Country,  
ZIP/Postal Code

**M. FLOM ASSOCIATES, INC.**  
3356 N. San Marcos Place, Suite 107  
CHANDLER, ARIZONA, U.S.A.  
85225-1571

M2UFRS-200

(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)

**MORTON FLOM, P. Eng., President**

2.(a) Technical contact: Firm name, contact person, number, street, City, State/Country, ZIP/Postal Code	<b>M. FLOM ASSOCIATES, INC.</b> MORTON FLOM, President 3356 No. San Marcos Place, #107 CHANDLER, ARIZONA, U.S.A. 85225 1571	(b) Telephone No. (Area/Country/City code, No. and Ext.) <b>1 480 926 3100</b>
(d) Internet e-mail address:	<b>www.mfлом.com</b>	(c) FAX No. (Area/Country/City code and No.) <b>1 480 926 3598</b>
(e) Non-Technical contact: Firm name, contact person, number, street, City, State/Country, ZIP/Postal Code	<b>M. FLOM ASSOCIATES, INC.</b> MORTON FLOM, President 3356 No. San Marcos Place, #107 CHANDLER, ARIZONA, U.S.A. 85225 1571	(f) Telephone No. (Area/Country/City code, No. and Ext.) <b>1 480 926 3100</b>
(h) Internet e-mail address:	<b>www.mfлом.com</b>	(g) FAX No. (Area/Country/City code and No.) <b>1 480 926 3598</b>

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.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

5. Type of equipment authorization requested: (check one box only)	<input checked="" type="checkbox"/> Certification	<input type="checkbox"/> Type Acceptance	<input type="checkbox"/> Notification
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6.(a) Equipment Code and description: (See instructions, page 4) <b>F R F</b> Family Radio Face Held Transmitter (UHF-FM HANDHELD FRS TRANSCEIVER)	(b) Equipment will be operated under FCC Rule Part(s): <b>95.191</b>
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7. Application is for: (Check one box only)	<input type="checkbox"/> 1. Original equipment (See instructions)	<input type="checkbox"/> 2. Change in identification of presently authorized equipment See Page 3 Item 10b <u>Multiple Listing</u>	<input type="checkbox"/> 3. Class II permissive change or modification of presently authorized equipment (See instructions)
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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
462.5625 to 467.7125	.3 ERP	±2.5 ppm	11K0F3E	-

9. Is the equipment in this application:	<input type="checkbox"/> (a) a composite device subject to more than one type of equipment authorization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	<input type="checkbox"/> (b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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