

FEDERAL COMMUNICATIONS COMMISSION - FCC FORM 731 APPLICATION FOR EQUIPMENT AUTHORIZATION		Approved by OMB 3060 - 0057 Expires 9/30/00	
You will be presented with the FCC FORM 159, Fee Remittance Advice after submitting your application and obtaining a confirmation number. This Fee Remittance Advice, FCC Form 159, must currently be submitted in paper form along with payment to the address indicated in the FCC Fee Filing Guide. Electronic submission of FCC Form 159 is not currently available.			
Item 1. Applicant's complete, legal business name: Neon Technology Inc			
Item 2. Applicant's mailing address			
Line 1: 87 W. Montague Expwy			
Line 2:			
P.O.Box:			
City: Milpitas			
State: CA Country(if foreign address): Zip/Postal Code: 95035			
Item 3. FCC ID: Grantee code: NJZ * Equipment Product Code (14 characters maximum):		<input type="text" value="NTFPSMSFD11NT"/>	
Item 4. Person at the applicant's address to receive grant or for contact:			
First Name: Tony		Mail Stop:	
Last Name: Chang		Telephone: Ext:	
Title: Design Engineer		Fax No:	
E-mail:			
Item 5. Instead of Applicant, FCC is authorized to mail original Grant to:			
Firm Name:			
<input type="text" value="PLEASE MAIL DIRECT TO APPLICANT"/>			
Address Line 1:		P.O.Box:	
<input type="text"/>		<input type="text"/>	
Address Line 2:		City:	
<input type="text"/>		<input type="text"/>	
Country(if foreign address):		State: <input type="text" value=""/>	
<input type="text"/>		<input type="text"/>	
Zip/Postal Code:		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
Person at above address to receive Grant:			
First Name:		Last Name:	
<input type="text" value="Jennifer"/>		<input type="text" value="Yambra"/>	
Title:		Mail Stop:	
<input type="text"/>		<input type="text"/>	
Item 6. Technical Contact:			
Firm Name:		Telephone: Ext: Fax No:	
<input type="text" value="PCTEST Engineering Lab., Inc."/>		<input type="text" value="301-596-2120"/> <input type="text" value=""/> <input type="text" value="410-290-6654"/>	