

**FEDERAL COMMUNICATIONS COMMISSION - FCC FORM 731
APPLICATION FOR EQUIPMENT AUTHORIZATION**

Approved by OMB
3060 - 0934
Expires 02/28/2005

Item 1. Applicant's complete, legal business name: **Raymarine UK Limited**

Item 2. Applicant's mailing address

Line 1: **Quay Point**
Line 2: **Northarbour Road**

P.O.Box:

City: **Portsmouth**
State: **Hampshire**

Country (if foreign address): **England, U.K.**

Zip/Postal Code: **PO6 3TD**

Item 3. FCC ID: Grantee code: **PJ5**

Grantee Code Registration No. **GC819326**

* Equipment Product Code (14 characters maximum): **-LTB**

Item 4. Person at the applicant's address to receive grant or for contact:

First Name: **Peter**
Last Name: **Bowen**
Title: **EMC Team Leader**
E-mail: **peter.bowen@Raymarine.com**

Mail Stop:
Telephone: **+44 (0)23 9269 3611** Ext: **1307**
Fax No: **+44 (0)23 9269 4642**

Item 5. Instead of Applicant, the original Grant is authorized to be mailed to:

Item 6. Technical Contact:

Firm Name: **Raymarine UK Ltd.** Telephone: **+44 (0)23 9269 3611** Ext: **1307** Fax No: **+44 (0)23 9269 4642**

First Name: **Peter** Middle Initial: **A** Last Name: **Bowen**
Address Line 1: **Quay Point**
Address Line 2: **Northarbour Road**
Country (if foreign address): **England, U.K.**
P.O.Box:
City: **Portsmouth**
Zip/Postal Code: **PO6 3TD**
E-mail: **peter.bowen@raymarine.com**

Item 7. Non-Technical Contact:

Firm Name: **Raymarine UK Ltd.** Telephone: **+44 (0)23 9269 3611** Ext: **1307** Fax No: **+44(0)23 9269 4642**
First Name: **Peter** Middle Initial: **A** Last Name: **Bowen**
Address Line 1: **Quay Point**
Address Line 2: **Northarbour Road**
Country (if foreign address): **England, U.K.**
P.O.Box:
City: **Portsmouth**
Zip/Postal Code: **PO6 3TD**
E-mail: **peter.bowen@raymarine.com**

Item 8. * 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 Rules?
If "Yes" see instructions.

(please mark as appropriate)

Yes No

Item 9. Does the applicant request that the Commission defer grant of this application pursuant 47 CFR § 0.457(d)(1)(ii)?
(See instructions) **No**

If so, specify date when grant may be issued (MM/DD/YYYY format):

Item 10.

* Equipment Class: **Part 15 Spread Spectrum Transmitter**

* Description of Product as it is Marketed: **Wireless MOB System Base Station**

(NOTE: This text will appear below the equipment class on the grant)

Item 11. * Application is for: (please mark as appropriate)

- Original Equipment (See instructions)
- Change in identification of presently authorized equipment: Original FCC ID:
Grant Date (MM/DD/YYYY format):
- Class II permissive change or modification of presently authorized equipment (See instructions)

Item 12. Is the equipment in this application:

- * (a) a composite device subject to an additional equipment authorization?
- * (b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization?

Yes No
 Yes No

If either of the above questions is answered "Yes" complete section 12(c).

(c) The related application:

- has been granted under the FCC ID listed to the right
- is in the process of being filed under the FCC ID listed to the right
- is pending with the FCC under the FCC ID listed to the right

FCC ID

PJ5-LTT

