

Application for Equipment Certification by Compatible Electronics TCB Committee

1. Applicant's complete, legal business name. Masimo Corporation	
2. Applicant's mailing address (Line 1) 40 Parker	
3. Applicant's mailing address (Line 2)	
4. City, State, Zip Irvine, CA, 92618	
5. Name, Title of Person registered with the FCC to receive the grant. Eugene Kim, Engineer	
6. Address to send the grant, if different than 2-4	
7. City, State, Zip to send the grant, if different than 2-4	
8. Phone No. (Area/Country/City Code, Number, Ext. 949-297-7447	9. Fax No. (Area/Country/City Code, Number, Ext. 949-297-7199
10. Internet email address mclark@masimo.com	11. Applicants FRN # (FCC registered number) 0016800161

Product Information

12. Name of Technical contact for the product. Michael Clark	
13. Mailing address 40 Parker	
14. City, State, Zip Irvine, CA 92618	
15. Phone No. (Area/Country/City Code, Number, Ext. 949-297-7447	16. Internet email address. mclark@masimo.com
17. Name of Non-technical contact for the product. David White	
18. Mailing address 40 Parker	
19. City, State, Zip Irvine, CA, 92618	
20. Phone No. (Area/Country/City Code, Number, Ext. 949-297-7180	21. Internet email address. dwhite@masimo.com
22. Equipment model RDS-7	
23. Equipment description (Please send a separate cover letter, with a brief explanation of the product and purpose of application.) See cover letter	
24. FCC ID Number GRANTEE CODE (3 Chars.) VKF	25. FCC ID equipment code (Max. 14 Chars.) RDS7
26. FCC ID Rule part. (15.249, 15.247, etc.) FCC 15.247 :2010, 15.407 :2010	27. Type of grant <input checked="" type="checkbox"/> Original Grant <input type="checkbox"/> Class II Permissive Change
28. Antennas <input type="checkbox"/> One antenna <input checked="" type="checkbox"/> Multiple antennas	29. Output power <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Variable
30. Modulations used <input type="checkbox"/> One <input checked="" type="checkbox"/> Multiple	31. Data rates possible <input type="checkbox"/> One <input checked="" type="checkbox"/> Multiple
32. Seeking modular approval? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Are there provisions for using this radio within 20 cm of the head or torso? (belt clips, holster, headset, etc.) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Other Information

34 Do you wish to hold some information permanently confidential? **Yes** **No**
 35 Do you wish to hold some information confidential short-term? **Yes** **No**

Free field for notes or comments:

FCC Required Attestation and Signature.

Read each certification carefully before answering and signing this application.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

36 SECTION 5301 (ANTI-DRUG ABUSE) CERTIFICATION:

The applicant must certify that neither the applicant nor any party to the application is subject to a denial of Federal benefits, that include FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862 because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the definition of a "part" for these purposes.

Does the applicant or authorized agent so certify?

Yes

No

37 NOT PREVIOUSLY SUBMITTED NOR DENIED

I certify that this product has not been previously submitted to the FCC nor to another TCB for certification. I further certify that this product has not previously been dismissed nor denied by the FCC nor by another TCB.

38 APPLICANT/AGENT Attestation:

I certify that I am authorized to sign this application. All of the statements herein and the exhibits attached hereto are true and correct to the best of my knowledge and belief. In accepting a Grant of Equipment Authorization issued by the TCB as a result of the representations made in this application, the applicant is responsible for (1) labeling the equipment with the exact FCC ID specified in this application, (2) compliance statement labeling pursuant to the applicable rules, and (3) compliance of the equipment with the applicable technical rules. If the applicant is not the actual manufacturer of the equipment, appropriate arrangements have been made with the manufacturer to ensure that production units of this equipment will continue to comply with the FCC's technical requirements.

Authorizing an agent to sign this application, is done solely at the applicant's discretion; however, the applicant remains responsible for all statements in this application.

If an agent has signed this application on behalf of the applicant, a written letter of authorization which includes information to enable the agent to respond to the above Section 5301 (Anti-Drug Abuse) Certification statement has been provided by the applicant. It is understood that the letter of authorization must be submitted to the FCC upon request, and that the TCB reserves the right to contact the applicant directly at any time.

39. ISO/IEC Guide 65 Requirements

By signing this application, the applicant agrees to the following requirements and conditions:

- a. Applicant is required to maintain a record of all complaints made known to applicant that relate to the compliance of the device described in this application with the requirements of the relevant standards for certification. Applicant will make such records available to Compatible Electronics upon request.
In addition, applicant is required to take appropriate actions with respect to such complaints and any deficiencies found in the device pursuant to such complaints and to document any corrective action taken.
- b. Unless prohibited by the Certification Regulations, Applicant's certification is revocable for cause, which includes, but is not limited to, the following:
 - i) Compatible Electronics is directed to revoke certification by the regulatory body.
 - ii) Applicant instructs Compatible Electronics in writing to revoke certification for a Device.
 - iii) Applicant fails to comply with the Certification Regulations of the Countries.
 - iv) Applicant fails to pay any fees required by this Agreement.
 - v) Applicant breaches any of the terms, conditions or specifications listed in this Agreement.
- c. In the event that applicant's certification is nullified or revoked, Compatible Electronics will notify the appropriate regulatory authorities that such certification has been nullified or revoked, as the case may be.
- d. The applicant will always comply with the relevant provisions of the certification program, and the requirements of the regulatory body under which certification is granted.
- e. The applicant will inform Compatible Electronics, without delay, of changes that may affect its ability to conform with the certification requirements.
- f. The applicant will make all necessary arrangements for the conduct of the evaluation, including provision for examining documentation and access to all areas, records and personnel for the purposes of evaluation, surveillance and resolution of complaints.
- g. The applicant will not make claims regarding certification only in respect of the scope for which certification has been granted.
- h. The applicant will not use its product certification in such a manner as to bring the certification body into disrepute and not to make any statement regarding its product certifications, which the certification body may consider misleading or unauthorized.
- i. If the applicant provides copies of the certification documents to others, the documents shall be reproduced in their entirety.
- j. The applicant will, upon suspension or cancellation of certification, discontinue its use of all advertising matter that contains any reference thereto and returns any certification documents as required by the certification body.
- k. The applicant will maintain a production sample of the device for at least one year after the last production date for the purposes of evaluation, surveillance and resolution of complaints, as required by the FCC or equivalent foreign regulatory body.
- l. In the event that the applicant has a complaint or a disagreement with the findings of the certification body, the complaint or appeal may be filed with the certification body by informing the committee via written notification either email or letter. In the event the original decision is upheld, the applicant may elect to accept or reject the finding. If the finding is accepted, then the applicant may respond to the finding by providing the necessary information which would result in a positive certification decision. If the finding is rejected then the governing agency who granted authority to the certification body shall be arbitrator of the dispute and the decision made by that body shall decide the outcome.

Compatible Electronics will not disclose to third parties any proprietary technical or financial information marked by Client as confidential without Client's prior written consent, provided that Compatible Electronics may disclose any information or data, confidential, proprietary or otherwise, to the FCC or its foreign equivalent. Other than the aforementioned disclosure, Compatible Electronics will inform Client of all information marked as confidential intended to be disclosed to third parties and will provide Client with an opportunity to seek confidential protection of such information. Any documents, reports, drawings, test data, etc., made available to, produced at the request of or produced by Compatible Electronics may be copied and retained by Compatible Electronics if necessary to the performance of this Agreement or in compliance with the applicable Certification Regulations of the Countries.



Original written signature of authorized signer

4-03-2013

Date (Month, Day, Year)

Michael Clark

Typed/printed name of authorized signer

Engineer Senior Test R&D Instruments

Title of authorized signer

Complete items below if an agent signs the application.

Agent's business name (if agent is used),

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

number, street,

City, State/Country,

ZIP/Postal Code

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

(e) Internet e-mail address:
