

(On manufacturer's company letter heading)

Declaration of Authorization

We Name: Address: City: Country:	Instant Care, Inc. 2080 Wineridge PL. Suite A Escondido, CA 92029, United States				
Declare that:					
Name Representative of agent: Agent Company name: Address: City: Country		Daphne Liang ⁽¹⁾ SGS Compliance Certification Services Inc. No. 168, Ln. 523, Sec. 3, Zhongzheng Rd., Rende Dist., Tainan City, 717017, Taiwan			
is authorized to appl	y for Certification	of the following product(s):			
Product description: Type designation:	Fall Sensor FS312				
Trademark: Validity/ expiry date	Instant Care				
on our behalf.					
Date:	05/15/23				
City:	San Diego				
Name:	Richard Darling	(2)			
Function:	CEO				
	Pull (Dan			

Notes:

Signature:

(1): Required for FCC application

(2): For FCC it must be the Grantee Code "owner" or the authorized agent.

Revision Record Sheet:

Revision	Section number	Page number	Date	Remark(s)	issued by
02		1	02-01-2023	History sheet added	AG

Issued/modified by : Axel Gase Function : Quality Manager

Revision : 02

Date : 02-01-2023

Verified by : Willem Jan Jong
Function : Team Lead
Date : 02-01-2023

Released by : Axel Gase

Function : Manager Quality Assurance

Date of release: : 02-01-2023