

The following is a sample Agency Request letter, which needs to be completed on company letterhead, signed by an authorized Applicant/Agent, and submitted to TÜV Rheinland.

Authority to Act as Agent

Date: 18-02-2022

TUV Rheinland of North America, Inc.
1279 Quarry Lane., Suite. A
Pleasanton, CA 94566

To Whom It May Concern:

I appoint Mr. Raghavedra Kulkarni of TUV Rheinland India Ltd. 27/B, 2nd cross road, Electronic City, Phase 1 Hosur Road Bangalore-560100 to act as our agent in the preparation of this application for equipment certification. I certify that submitted documents properly describe the device or system for which equipment certification is sought. I also certify that each unit manufactured, imported or marketed, as defined in the FCC or Industry Canada's regulations will have affixed to it a label identical to that submitted for approval with this application.

For instances where our authorized agent signs the application for certification on our behalf, I acknowledge that all responsibility for complying with the terms and conditions for Certification, as specified by TÜV Rheinland Group, still resides with Mr. Carl Mamuszka of ZOLL Medical Corporation 269 Mill Rd, Chelmsford, MA 01824, USA.

For TCB applications, We certify that we are not subject to denial of federal benefits, that includes FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. 862. Further, no party, as defined in 47 CFR 1.2002 (b), to the application is subject to denial of federal benefits, that includes FCC benefits.

Thank you,

Agency Agreement Date: 18-02-2022

Agreement is valid for 12 months from the above date.

By:



(Signature)

Carl Mamuszka
(Print name)

Principal Compliance Engineer
(Title)

+1 978-421-9330
(Telephone)

On behalf of:

ZOLL Medical Corporation
(Company Name)