

VERIFICATION OF COMPLIANCE

This Verification of Compliance is hereby issued to the below named company. The test results of this report relate only to the tested sample identified in this report.

Technical Standard: FCC 47 CFR PART 15 SUBPART B AND ANSI C63.4 (2003) IC ICES-003

General Information

Applicant:	Nxtar Fiber Optic Security Co., Ltd NO.191, Yanzhou 2nd St., YongKang City, Tainan Contury 71082, Taiwan	
Manufacturer	Nxtar Fiber Optic Security Co., Ltd NO.191, Yanzhou 2nd St., YongKang City, Tainan Contury 71082, Taiwan	

Product Description

EUT Description	:	Nxtar Monitoring		
Model Number	:	NS200M		
Laboratory Name:		<i>Compliance Certification Services Inc. (Tainan Lab.)</i> <i>No.8, Jiucengling, Xinhua Dist., Tainan City 712, Taiwan (R.O.C.)</i> <i>Tel:</i> +886-6-5802201 / <i>Fax:</i> +886-6-5802202		

This device has been shown to be in compliance with and was tested in accordance with the measurement procedures specified in the Standards \Im Specifications listed above and as indicated in the measurement report number: T120613N01-D

Jeter Wu / Assistant Manager

Jeter Wu / Assistant Manage Tainan Lab. Date: June 22, 2012





Declaration of Conformity Documentation

The following equipment:

- * Type of Product : Nxtar Monitoring
- * Model Number : NS200M

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* Report Number : T120613N01-D

is herewith confirmed to comply with the requirements of FCC Part 15 Rules. Operation is subject to the following two conditions:

(1)This device may not cause harmful interference, and

(2)This device must accept any interference received, including interference that may cause undesired operation.

The result of electromagnetic emission has been evaluated by Compliance Certification Services Inc. EMC laboratory (**TAF Lab. Code :** <u>1109</u>) and showed in the test report.

It is understood that each unit marketed is identical to the device as tested, and any changes to the device which could adversely affect the emission characteristics will require retest.

The following importer / manufacturer is responsible for this declaration :

Company Name

Company Address	:	
Telephone	:	Facimile :
Name (Full name)		Position :

Person is responsible for making this declaration :

Name (Full name)

Position / Title

Legal Signature

Date