

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 Part 15 Class B (DoC) IC ICES-003 Issue 5

General Information

Applicant:

ZEBEX INDUSTRIES INC. B1F.-1, No. 207, Sec. 3, Beixin Rd, Xindian Dist, New Taipei City 23143, Taiwan

Product Description

EUT Description:	Handy Wireless Scanner
Model Number:	Z-3250
Data Applies To:	Z-3251
Trade Name:	ZEBEX

Laboratory Name:

Compliance Certification Services Inc. (Hsin-Chu Lab). NO. 989-1 Wen Shan Rd., Shang Shan Village, Qionglin Shiang Hsinchu County 30741, Taiwan, R.O.C Tel: +886-3-5921698 / Fax: +886-3-5921108

This device has been shown to be in compliance with and was tested in accordance with the measurement procedures specified in the Standards & Specifications listed above and as indicated in the measurement report number: T140219D05-D

J. B. In

Sb Lu / Sr. Engineer

Date: March 12, 2014





Declaration of Conformity Documentation

The following equipment:

- * Type of Product : Handy Wireless Scanner
- * Model Number : Z-3250
- * Data Applies To : Z-3251
- * Trade Name : ZEBEX
- * Report Number : T140219D05-D

is herewith confirmed to comply with the requirements of FCC Part 15 / IC ICES-003 Issue 5 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>0240</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