**RSS-102 Attestation Changes (March 2015)**

**NOTE:**

**The following pages contain RSS-102 ANNEX A1/A2, B & C. The following process must now be followed by applicants for IC:**

**excerpt from RSS-102**

**2.4 Approval Process**

To obtain approval under this standard, the above-mentioned application for certification shall be

accompanied by the duly completed RF technical brief cover sheet (see Annex A1/A2) and a properly signed declaration of compliance (see Annex B). However, if the device in question meets the exemption from routine evaluation limits of sections 2.5.1 or 2.5.2, only a signed declaration of compliance needs to be submitted (see Annex C).

In addition, submission of the RF exposure technical brief is now required for certification. It shall be accompanied by the completed RF technical brief cover sheet.

(NOTE: Annex A1/A2 & B are Required When SAR or RF Evaluation Measurements are Applicable)

RSS-102 Annex A1 (SAR and LPD Technical Brief Cover Sheet)

The worst case LPD, SAR, RF Exposure and/or Nerve Stimulation values applicable to the test device are to be reported in the sections below.

All fields must be complete with the requested information or the following codes:

N/A for Not Applicable, N/P for Not Performed or N/V for Not Available

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant/Product Information** | | | |
| **Company Number:** |  | **IC Certification Number:** |  |
| **Product Marketing Name (PMN):** |  | **Host Marketing Name (HMN):** |  |
| **Hardware Version ID. (HVIN):** |  | **Software Version ID.Number (FVIN):** |  |
| **Applicant:** |  | | |

**Localized Power Density > 6 GHz**

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| --- | --- | --- | --- | --- | --- |
| **LPD: Vicinity of Human Head Device** | | | **LPD Test Lab:** | | |
| **Multiple Transmitter:** | **-Yes  -No** | | **Duty Cycle:** | | **%** |
| **Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | **Compliance Distance:** | **mm** |
| **LPD Value:** | **W/cm2** | **-Measured   -Calculated -Computed** | | | |

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| --- | --- | --- | --- | --- | --- |
| **LPD: Body Worn or Body Supported Device** | | | **LPD Test Lab:** | | |
| **Multiple Transmitter:** | **-Yes  -No** | | **Duty Cycle:** | | **%** |
| **Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | **Compliance Distance:** | **mm** |
| **LPD Value:** | **W/cm2** | **-Measured   -Calculated -Computed** | | | |

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| **LPD: Limb-Worn Device** | | | **LPD Test Lab:** | | |
| **Multiple Transmitter:** | **-Yes  -No** | | **Duty Cycle:** | | **%** |
| **Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | **Compliance Distance:** | **mm** |
| **LPD Value:** | **W/cm2** | **-Measured   -Calculated -Computed** | | | |

**SAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SAR: Vicinity of Human Head Device** | | | **SAR Test Lab:** | | |
| **Multiple Transmitter:** | **-Yes  -No** | | **Duty Cycle:** | | **%** |
| **Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | **Compliance Distance:** | **mm** |
| **SAR Value:** | **W/kg** | **-Measured   -Calculated -Computed** | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SAR: Body Worn or Body Supported Device** | | | **SAR Test Lab:** | | |
| **Multiple Transmitter:** | **-Yes  -No** | | **Duty Cycle:** | | **%** |
| **Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | **Compliance Distance:** | **mm** |
| **SAR Value:** | **W/kg** | **-Measured   -Calculated -Computed** | | | |

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| --- | --- | --- | --- | --- | --- |
| **SAR: Limb-Worn Device** | | | **SAR Test Lab:** | | |
| **Multiple Transmitter:** | **-Yes  -No** | | **Duty Cycle:** | | **%** |
| **Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | **Compliance Distance:** | **mm** |
| **SAR Value:** | **W/kg** | **-Measured   -Calculated -Computed** | | | |

RSS-102 Annex A2 (RF Exposure Evaluation and NS Technical Brief Cover Sheet)

The worst case SAR, RF Exposure and/or Nerve Stimulation values applicable to the test device are to be reported in the sections below.

All fields must be complete with the requested information or the following codes:

N/A for Not Applicable, N/P for Not Performed or N/V for Not Available

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| --- | --- | --- | --- |
| **Applicant/Product Information** | | | |
| **Company Number:** |  | **IC Certification Number:** |  |
| **Product Marketing Name (PMN):** |  | **Host Marketing Name (HMN):** |  |
| **Hardware Version ID. (HVIN):** |  | **Software Version ID.Number (FVIN):** |  |
| **Applicant:** |  | | |

**RF Exposure Evaluation Information**

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| --- | --- | --- | --- | --- | --- | --- |
| **RF Exposure Evaluation Information** | | | | **RF Exposure Test Lab:** | | |
| **RF Exposure Limits Used:** | **-General Public Use  -Controlled Use** | | | | **Duty Cycle:** | **%** |
| **RF Field Strength Value:** |  | **-V/m**  **-A/m**  **-W/m2** | **-Measured**  **-Calculated**  **-Computed** | | **Compliance Distance:** | **Meter(s)** |
| **(Note: 10 W/m2 = 1 mW/cm2)** | | | | | | |

**Nerve Stimulation (NS) Exposure Information**

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| --- | --- | --- | --- | --- | --- |
| **Nerve Stimulation Exposure Information** | | | | **NS Test Lab:** | |
| **RF Exposure Limits Used:** | | **-General Public Use  -Controlled Use** | | | |
| **Electric Field Strength Value** | | | | | |
| **Value:** | **V/m (r.m.s.)** | | **-Measured**  **-Computed** | | **-Body/Torso/Head**  **-Arm**  **-Leg**  **-Hand/Foot** |
| **Compliance Dist:** | **Meter(s)** | |
| **Magnetic Field Strength Value** | | | | | |
| **Value:** | **A/m (r.m.s.)** | | **-Measured**  **-Computed** | | **-Body/Torso/Head**  **-Arm**  **-Leg**  **-Hand/Foot** |
| **Compliance Dist:** | **Meter(s)** | |

RSS-102 Annex B

(NOTE: Annex A1/A2 & B are Required When SAR or RF Evaluation Measurements are Applicable)

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| **ATTESTATION:**  I attest:  a) that the information provided in Annex A1/A2 is correct;  b) that the device evaluation was performed or supervised by me;  c) that applicable measurement methods and evaluation methodologies have been followed;  d) and that the device meets the SAR, RF Exposure Evaluation, and/or Nerve Stimulation limits of RSS-102. |
| Signature:  Date: |
| **NAME (Please print or type):**    **TITLE (Please print or type):**    **COMPANY (Please print or type):**    **HVIN NUMBER:**    **IC CERTIFICATION NUMBER:** |

Note 1: To obtain approval under this standard, the above-mentioned application for certification shall be accompanied by the duly completed RF technical brief cover sheet (see Annex A1/A2) and a properly signed declaration of compliance (see Annex B). However, if the device in question meets the exemption from routine evaluation limits of sections 2.5.1 or 2.5.2, only a signed declaration of compliance needs to be submitted (see Annex C).

Note 2: In addition, submission of the RF exposure technical brief is now required for certification. It shall be accompanied by the completed RF technical brief cover sheet (Annex A1/A2+B or C).

Note 3: In cases of exemption according to RSS-102, the information contained in the RF exposure technical brief may be limited to information that demonstrates how the e.i.r.p. or output power was derived (Annex C).

RSS-102 Annex C

(NOTE: Declaration of RF Exposure Compliance for Exemption from Routine Evaluation Limits)

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| **ATTESTATION:**  I attest:  a) that the radiocommunication apparatus meets the exemption from the routine evaluation limits in Section 2.5 of RSS-102;  b) that the Technical Brief was prepared and the information contained therein is correct;  c) that the device evaluation was performed or supervised by me;  d) and that the device meets the SAR, RF Exposure Evaluation, and/or Nerve Stimulation limits of RSS-102. |
| Signature: |
| Date: |
| **NAME (Please print or type):**    **TITLE (Please print or type):**    **COMPANY (Please print or type):**    **HVIN NUMBER:**    **IC CERTIFICATION NUMBER:** |

Note 1: To obtain approval under this standard, the above-mentioned application for certification shall be accompanied by the duly completed RF technical brief cover sheet (see Annex A) and a properly signed declaration of compliance (see Annex B). However, if the device in question meets the exemption from routine evaluation limits of sections 2.5.1 or 2.5.2, only a signed declaration of compliance needs to be submitted (see Annex C).

Note 2: In addition, submission of the RF exposure technical brief is now required for certification. It shall be accompanied by the completed RF technical brief cover sheet (Annex A+B or C).

Note 3: In cases of exemption according to RSS-102, the information contained in the RF exposure technical brief may be limited to information that demonstrates how the e.i.r.p. or output power was derived (See section 2.5.1 and 2.5.2) adjusted for tune-up tolerance and compared against the appropriate exemption limit. Note for section 2.5.1 scaling factors may apply for controlled use or limb-worn devices and Linear interpolation is applied between frequencies at the distances specified.