



Dear Valued Customer:

Thank you for your recent **syncTECH™** purchase.

In accordance with Federal Communications Commission guidelines, the use of our **syncTECH™** product requires Radio Service Authorization. In an effort to guide you through the authorization process, we have provided the following documents:

»FCC License Application Preparation Worksheet

»Federal Communications Commission Form 601

**PLEASE COMPLETE THE ABOVE FORMS AND SUBMIT VIA FAX to Katie Nash, 720 293 9393**

Note that federal records policies consider the information provided on the application public knowledge. Consequently, several bogus companies, operating under the names "Business Radio Licensing," "Federal Licensing, Inc.," and possibly many others, have been accessing this information and sending letters to our customers soliciting money. **You are advised to discard such letters.**

Be assured, Peter Pepper Products and our technology partner, BRG Precision Products, are taking the necessary steps to obtain your FCC license. Therefore, you should only honor correspondence from Peter Pepper Products, BRG, or the FCC.

If you have any questions regarding your FCC license, please contact BRG:

Katie Nash

800 295 0220 x 206

knash@brgproducts.com

For questions regarding other matters, please contact the Peter Pepper Customer Service Team:

800 496 0204

customerservice@peterpepper.com



IN PARTNERSHIP WITH



800 496 0204  
www.peterpepper.com

**BRG Precision Products**  
600 N. River Street Derby, KS 67037

PHONE (800) 295-0220  
FAX (316)788-7080

FCC LICENSE APPLICATION PREPARATION WORKSHEET (Rev 05/01/06)  
(Time Clocks)

Legal Name of Applicant: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Person signing application: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Applicant Federal Tax ID Number: \_\_\_\_\_ County: \_\_\_\_\_

Please check the type of business:    \_\_\_ Individual           \_\_\_ Proprietorship       \_\_\_ Government Entity  
  \_\_\_ Corporation           \_\_\_ Partnership           \_\_\_ Association

*Master Clock # 1*

Physical address: \_\_\_\_\_ City, State \_\_\_\_\_ Zip: \_\_\_\_\_  
(Transmitter location)

**TECHNICAL INFORMATION:**    Please check the frequency to be licensed:    \_\_\_ 464.600 MHz        \_\_\_ X 464.650 MHz

Please check the base power:    \_\_\_ 5 Watt               \_\_\_ 25 Watt               \_\_\_ 70 Watt                \_\_\_ 100 Watt \_\_\_

Estimate on maximum # of secondary clocks to be installed: \_\_\_\_\_

Height above ground to tip of antenna: \_\_\_\_\_ Height of building or other antenna structure: \_\_\_\_\_

Location of business: Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Is antenna mounted inside of a building? On top of a building? Other (please explain): \_\_\_\_\_

*Master Clock # 2 (if applicable)*

Physical address: \_\_\_\_\_ City, State \_\_\_\_\_ Zip: \_\_\_\_\_  
(Transmitter location)

**TECHNICAL INFORMATION:**    Please check the frequency to be licensed:    \_\_\_ 464.600 MHz        \_\_\_ X 464.650 MHz

Please check the base power:    \_\_\_ 5 Watt               \_\_\_ 25 Watt               \_\_\_ 70 Watt                \_\_\_ 100 Watt \_\_\_

Estimate on maximum # of secondary clocks to be installed: \_\_\_\_\_

Height above tip of antenna: \_\_\_\_\_ Height of building or other antenna structure: \_\_\_\_\_

Location of business: Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Is antenna mounted inside of a building? On top of a building? Other (please explain): \_\_\_\_\_

**General Certification Statements**

- |    |  |
|----|--|
| 1) | The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.   |
| 2) | The Applicant certifies that grant of this application would not cause the Applicant to be in violation of any pertinent cross-ownership or attribution rules.*<br>*If the Applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.  |
| 3) | The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.   |
| 4) | The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR § 1.2002(c). See §1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification. |
| 5) | The Applicant certifies that it either (1) has current required ownership data on file with the Commission, (2) is filing updated ownership data simultaneously with this application, or (3) is not required to file ownership data under the Commission's Rules.   |
| 6) | The Applicant certifies that the facilities, operations, and transmitters for which this authorization is hereby requested are either: (1) categorically excluded from routine environmental evaluation for RF exposure as set forth in 47 C.F.R. 1.1307(b); or, (2) have been found not to cause human exposure to levels of radiofrequency radiation in excess of the limits specified in 47 C.F.R. 1.1310 and 2.1093; or, (3) are the subject of one or more Environmental Assessments filed with the Commission.   |
| 7) | The Applicant certifies that it has reviewed the appropriate Commission Rules defining eligibility to hold the requested license(s), and is eligible to hold the requested license(s).   |
| 8) | The Applicant certifies that it is not in default on any payment for Commission licenses and that it is not delinquent on any non-tax debt owed to any federal agency.   |

**Signature**

56) Typed or Printed Name of Party Authorized to Sign

First Name:	MI:	Last Name:	Suffix:
57) Title:			
Signature:			58) Date:

**FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.**

**Upon grant of this license application, the Licensee may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in termination of the license. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of license requested in this application.**

**WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).**