

OMRON Corporation 6368 NENJO-ZAKA OKUSA KOMAKI-CITY AICHI 485-0802 JAPAN

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Attn: Director of Certification

Authority to Act as Agent

application for e device or systen manufactured, in	equipment certification. I certi n for which equipment certific mported or marketed, as define	to act as our agent in the preparation of this fy that submitted documents properly describe the ation is sought. I also certify that each unit ed in Industry Canada's regulations will have for approval with this application.
acknowledge tha Certification, as	at all responsibility for comply	s the application for certification on our behalf, I ving with the terms and conditions for still resides with <u>OMRON Corporation</u> , 6368
Dated this	<u>5</u> day of <u>J</u> ı	<u>ine</u> , 20_ <u>06</u>
Agency Agreem	ent Expiration Date: (Typ	ically 8-12 months)
By:	(Signature)	Shuji Yamashita (Print name)
Title:	Manager	
On behalf of:	OMRON Corporation (Company Name)	
Telephone:	+81 568 78 6392	