



### DTS-UNII Device Declaration Letter

Date: January 21, 2022

To whom it may concern:

We have declared below featured for FCC equipment authorization,

FCC ID: **HLZAX211NG**

(1) DFS Device -- ☐ Master , ☐ Client with Radar detection capability ,

☒ Client without radar detection capability, ☐ N/A

(2) Active / Passive Scanning, adhoc mode access point capability

| Frequency Band (MHz) | Active Scanning (the device can transmit a probe (beacon))            | passive scanning (where the device is can listen only with no probes) | Ad Hoc Mode or WIFI Direct capability                                 | Access point capability                                               |
|----------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|
| 2412-2462            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 2422-2452            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5180-5240            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5190-5230            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5210-5210            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5270-5310            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5260-5320            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5290-5290            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5250-5250            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5500-5700            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5530-5690            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5510-5670            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5530-5690            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5720-5720            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5710-5710            | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No |
| 5745-5825            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5755-5795            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5775-5775            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5955-7115            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5965-7085            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 5985-7025            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |
| 6025-6985            | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input type="checkbox"/> Yes , <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes , <input type="checkbox"/> No |

This information when programmed into the EEPROM will not be accessible and can not be changed by the end user.

If you have any questions, please do not hesitate to contact us.



Signature,

A handwritten signature in black ink, appearing to read "Harriot Lee".

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Harriot Lee / Manager  
Acer Incorporated