We Name:



(On manufacturer's company letter heading)

Autonomous Pivot Ltd.

## **Declaration of Authorization**

Address: City:	281 Nahal Timna, Eshtaol,
Country:	Israel
Declare that:	
Name Representativ Agent Company nar Address: City: Country	ve of agent: Peysahov Sheynin Svetlana (1) ne: Hermon Laboratories Ltd. Harakevet Industrial Zone Binyamina 3055001 Israel
is authorized to appl	y for Certification of the following product(s):
•	Autonomous Pivot Sense
on our behalf.	
Date:	January 27, 2025
City:	Eshtaol
Name:	Yair Sharf
Function:	Co Founder and VP R&D
Signature:	Autonomous Pivot Ltd. 515789527

## Notes:

<sup>(1):</sup> Required for FCC application

<sup>(2):</sup> For FCC it must be the Grantee Code "owner" or the authorized agent.

## **Revision Record Sheet:**

Revisio n	Section number	Page number	Date	Remark(s)	issued by
02		1	02-01-2023	History sheet added	AG

Issued/modified by : Axel Gase Function : Quality Manager

Revision : 02

: 02-01-2023 Date

Verified by : Willem Jan Jong Function : Team Lead : 02-01-2023 Date

Released by : Axel Gase Function : Manager Quality Assurance Date of release: : 02-01-2023