**Supplier's Declaration of Conformity**

**47 CFR § 2.1077 Compliance Information**

**We, 美国公司 (美国市场的负责方，必须在美国。可以是申请商，进口商，卖家)**

**(The responsible party, who must be located in the United States)**

**Hereby, declare that the essential requirements set out in the 47 CFR Sections 2.906 of FCC, have been fully fulfilled on our product with indication below:**

**Applicant Information**

|  |  |
| --- | --- |
| **Applicant:** | Shenzhen Huafurui Technology Co., Ltd. |
| **Address:** | Unit 1401 &1402, 14/F, Jinqi zhigu mansion (No. 4 building of Chongwen Garden), Crossing of the Liuxian street and Tangling road, Taoyuan street, Nanshan district, Shenzhen, P.R. China |
| **Tel:** |  |
| **Email:** |  |

**Product information**

|  |  |
| --- | --- |
| **Product Name:** | Smartwatch |
| **Model Number:** | C7 |
| **Trade Name (if have):** | CUBOT/HAFURY |

**Applied Standard**

|  |  |
| --- | --- |
| **Standards** | **Report No.** |
| FCC CFR Title 47 Part 15 Subpart B | JYTSZB-R01-2100213 |
| **This device complies with Part 15 of the FCC Rules. Operation is subject to the following two conditions: (1) This device may not cause harmful interference, and (2) this device must accept any interference received, including interference that may cause undesired operation.** | |

**Test firm information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name:** | JianYan Testing Group Shenzhen Co., Ltd. | | |
| **Address:** | No.101, Building 8, Innovation Wisdom Port, No.155 Hongtian Road, Huangpu Community, Xinqiao Street, Bao'an District, Shenzhen, Guangdong, People's Republic of China. | | |
| **Contact Number:** | +86-755-2311 8282 | **Email:** | info@ccis-cb.com |
| **FCC Designation No.** | CN1211 | **Registration No.** | 727551 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Responsible party in US.** | | | |
| **Company Name:** |  | | |
| **Address:** |  | | |
| **Contact person:** |  | **Title:** |  |
| **Telephone:** |  | **Email:** |  |
| **Signature:** |  | **Date:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant’s Authorization** | | | |
| **Company Name:** |  | | |
| **Address:** |  | | |
| **Contact person:** |  | **Title:** |  |
| **Telephone:** |  | **Email:** |  |
| **Signature:** |  | **Date:** |  |