

Certification Application Attestation Statements

All Inspire Health
FRN: 0036538239
19 Morris Avenue, Building 128,
NY 11205
Brooklyn, United States

Subject: **FCC ID: 2BNIV-EXP-1**

To Whom It May Concern:

Statement for 47 CFR section 2.911(d)(5)(i)

[All Inspire Health] certifies that as of the date of the application the equipment for which authorization is sought is not “covered” equipment¹ prohibited from receiving an equipment authorization pursuant to section 2.903 of the FCC rules.

If the equipment for which the applicant seeks authorization is produced by any of the entities identified on the current Covered List, including affiliates or subsidiaries of the named companies, the applicant must include an explanation on why the equipment is not “covered” equipment.

Additional Explanation: <N/A>

Statement for 47 CFR section 2.911(d)(5)(ii)

[All Inspire Health] (“the applicant”) certifies that, as of the date of the filing of this application, the applicant

☐ - is / ☒ - is not ⁽³⁾

identified on the Covered List as an entity producing “covered” equipment.

Date:	September 7, 2025
City:	Brooklyn
Name ⁽²⁾ :	Jonathan Gips
Function:	Head of Hardware and Systems
Telephone number:	1-201-256-1311
Email address:	fcc@inspiren.com
Signature:	

¹ - The Commission’s [Covered List](https://www.fcc.gov/supplychain/coveredlist) is published by the Public Safety and Homeland Security Bureau and posted on the Commission’s website. This Covered List, which is periodically updated, identifies particular equipment, produced by particular entities, that constitutes “covered” equipment. <https://www.fcc.gov/supplychain/coveredlist>.

(2): For FCC it must be the Grantee Code “owner” or the authorized agent.

(3): double click on the appropriate box and select “checked” then “OK”