

UN38.3 LITHIUM CELL/BATTERY TEST SUMMARY

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| a | Name of cell, battery, or product manufacturer, as applicable; |
| | GPX. 0311-0041. RL118C/D |

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| b | Cell, battery, or product manufacturer's contact information to include address, phone number, email address and website for more information; |
| Name | MASTER INSTRUMENTS / METCO |
| Address | 59 INNOVATION CIRCUIT WANGARA WA 6065 |
| Phone | 61893025444 |
| Email | markb@master-instruments.com.au |
| Website | www.master-instruments.com.au |

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| c | Name of the test laboratory to include address, phone number, email address and website for more information; |
| Name | SGS |
| Address | WU CHYUAN RD, WUKU, TAIPEI TAIWAN |
| Phone | 886222993279 |
| Email | Click or tap here to enter text. |
| Website | www.tw.sgs.com |

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| d | A unique test report identification number; |
| | HE40027/2011 |
| e | Date of test report; |
| | 27 JUNE 2011 |

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| f | Description of cell or battery to include at a minimum: | |
| i: | Lithium ion <i>or</i> | <input checked="" type="checkbox"/> |
| | lithium metal | <input type="checkbox"/> |
| | Cell <i>or</i> | <input type="checkbox"/> |
| | Battery | <input checked="" type="checkbox"/> |
| ii: | Mass | Click or tap here to enter text. |
| iii: | Watt-hour rating <i>or</i> | 68WH |
| | lithium content | N/A |
| iv: | Physical description of the cell/battery; | |
| LI-ION BATTERY PACK IN ALUMINIUM HOUSING | | |

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|----|----------------|--------------------------|
| v: | Model Number/s | GPX. 0311-0041. RL118C/D |
|----|----------------|--------------------------|

| g | List of tests conducted and results (i.e., pass/fail); | N/A | Pass | Fail |
|----|--|-------------------------------------|-------------------------------------|--------------------------|
| T1 | Altitude Simulation | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| T2 | Thermal Shock | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| T3 | Vibration | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| T4 | Shock | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| T5 | External Short Circuit | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| T6 | Impact/Crush | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| T7 | Overcharge | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| T8 | Forced Discharge | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Click or tap here to enter text. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Click or tap here to enter text. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| h | Reference to assembled battery testing requirements, if applicable (i.e. 38.3.3 (f) and 38.3.3 (g)); |
| UN38.3 | |

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| i | Reference to the revised edition of the Manual of Tests and Criteria used and to amendments thereto, if any; |
| UN SG/AC.10/11/REV 5 | |

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|---------------|---|--|------------|
| j | Signature with name and title of signatory as an indication of the validity of information provided | | |
| MARK BEAMISH | WA STATE MANAGER |  | 19/12/2019 |
| Name, Surname | Title | Signature | Date |