Declaration of Conformity

Legal Identity:

Palomar Medical Technologies, Inc
15 Network Dr.
Burlington
MA 01803
USA
Tel: + 1 781-993-2300
Fax: + 1 781-993-2330

Authorized Representative:

CRS Medical GmbH
Ringstrasse 2
35614 Asslar
Germany
49-6441-38331-29
Palomar_eu@crs-medical.com

Equipment Identification

Type of Equipment: Intense Pulsed Light & Laser System

Model Number (s):

1500(x)-8000 Artisan™ Aesthetic System
8520(x)-1440(y) 1440 Handpiece
8520(x)-1540(y) 1540 Handpiece
8520(x)-2940(y) 2940 Handpiece
8520(x)-G046(y) MaxG Handpiece

**the (x) succeeding the above part numbers denotes the manufacturing revision
***the (y) succeeding the above part numbers denotes loaner and/or remanufactured handpieces. Should (y) be left blank this will signify a newly manufactured handpiece

We, Palomar Medical Technologies, Inc., hereby declare that the devices mentioned above comply with the Swedish Medical Product Agency regulation LVFS 2003:11- transposing European Medical Devices Directive 93-42-EEC

Date of Validity:	1/4/2011
Classification:	IIb According to Rule 9
Conformity Assessment Procedure:	Annex II
Name of Authorized Signatory:	Steven D Armstrong
Position Held in Company:	Senior Vice President of Operations

Signature