

UN38.3 LITHIUM CELL/BATTERY TEST SUMMARY

a	Name of cell, battery, or product manufacturer, as applicable;
	GPX. 0311-0041. RL118D

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

c	Name of the test laboratory to include address, phone number, email address and website for more information;
Name	Eurofins RE&E Wireless Taiwan Co Ltd
Address	18F, 716 Zhongzheng Rd, Zhonghe, Taipei 235
Phone	886282261579
Email	Click or tap here to enter text.
Website	www.atl.com.tw

d	A unique test report identification number;
	C247178

e	Date of test report;
	18/11/2024

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>	72.52WH
	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. RL118D
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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"/>

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

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 7

j	Signature with name and title of signatory as an indication of the validity of information provided		
	MARK BEAMISH	WA STATE MANAGER	9/12/2024
			
	Name, Surname	Title	Signature
			Date