

Declaration of Conformance – Device

This Declaration of Conformance is issued by the indicated Member which is solely responsible for declared conformance. Conformance is valid ONLY for the device identified when used in a manner consistent with the intent of the referenced documents.

Responsible member:

Member name:	SAMRIDDHI AUTOMATIONS PVT LTD
Member address:	LOT NO. -75 SECTOR-7 SIDCUL INDUSTRIAL AREA HARIDWAR UTTRAKHAND

Device:

Product type:	PTZ Camera
Product name:	SS-EM212-(I)
Product firmware version:	V.4.1.0
Profile S features:	PTZ: Yes Audio: Yes I/O: Yes
Profile G features:	Recording from local source (Video Input): Yes Recording from remote source (separate IP Device): NO Audio Recording and Replay: Yes Reverse Replay: NO PTZ Position Search: NO
Profile T features:	Secure Streaming: NO WebSocket Streaming: NO Video Source Mode: NO Video Streaming: H.264: Yes H.265: Yes Audio Streaming: Yes G.711: Yes AAC: Yes Audio Output Streaming: Yes G.711: Yes AAC: NO Analytics Service: Yes Motion Detection: NO PTZ: Yes Generic Coordinate Spaces: Yes Spherical Coordinate Spaces: NO (no motorized pan/tilt) Focus Control: Yes Relay Outputs: NO Digital Inputs: NO Auxiliary Commands: NO

The device identified above conforms to the following specifications:

Profile: Profile T; Profile S; Profile G

Add-on:

ONVIF Device Test Tool version: 23.06 rev. 96

Tool test result: FAILED TEST CASES: 0

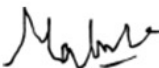
This Declaration of Conformance MUST be accompanied by the Test Report generated by the ONVIF Device Test Tool

Technical support contact information:

General international support mailing address:	www.sparshsecuritech.com
Regional support contact address:	none
Technical support website URL:	www.sparshsecuritech.com
Technical support email:	www.sparshsecuritech.com
Technical support phone:	18002700590

By signing this document the Member acknowledges that the device conforms to the requirements related to the mandatory and applicable conditional features as stated in the specification(s) of the claimed profile(s).

Signature of Authorized Representative:

Signature:	
Name:	Malvika Pathak
Title and department:	Manager R&D
Date:	November 8, 2023

This Declaration of Conformance MUST be accompanied by the Feature List generated by the ONVIF Device Test Tool