RENESAS ELECTRONICS SINGLE-CHIP 16-BIT MICROCOMPUTER R8C/2D Group

ROM PROGRAMMING CONFIRMATION FORM

ROM number

	Date:	
Ъ	Section mgr signature	PIC signature
Receipt		

Note: Please fill in all items marked *

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		Company	TEL		ure	Submitted by
*	Applicant	Name	()		ant ignat	
		Date issued	Year / Month / Date Date:		Applic: s	
	lask file lease kin		and confirm the mask file in the submitted CD-R p	orior to	subn	nission.

Please submit mask files on CD-R. And the number of the mask file must be 1 mask file per one CD-R.

Part Number	□R5F212	2D7SNXXXFP	□R5F2	12D7SD	XXXFP	□R5F	212D8SNXXXFP	□R5F212D8SDXXXFP
	□R5F212	2DASNXXXFP	□R5F2	12DASD	XXXFP	□R5F	212DCSNXXXFP	□R5F212DCSDXXXFP
File Code) (hexadecim	al notation)
Mask file	name						.MSK (no mo	re than 8 characters)
CAUTI Note 1 : ROM		his product	programs th	ie Data	Flash are	ea.		
Note 2 : ROM data confirmation request ROM programming will be processed based on the mask file generated by the mask file generating utility. Only in case when ROM data programmed in the actual mass produced product differs from that of above mentioned mask file, RENESAS takes the responsibility. <u>There is no Engineering Sample, thus please confirm the ROM data at the receipt of the Initial product delivery.</u> <u>Should you find any problem, please return immediately. 2 weeks without technical error feedback towards RENESAS will automatically be regarded as acceptance of products.</u> Note 3 : Mask Option A fixed mask option data (01 ₁₆) must be written to the option data address (10 ₁₆).								
Note 4 : Mark specification Please refer to Figs. 1 about mark specification.								
			R5F2	XXXXXXX 212DCSN yyyFA	J A		yyy : ROM numb XXXX or XXXXX	er XXXX : Lot number
				212DCSN yyyFA	J A			