## RENESAS ELECTRONICS SINGLE-CHIP 16-BIT MICROCOMPUTER R5F212F4NXXXFP ROM PROGRAMMING CONFIRMATION FORM

	Date:	
Dt .	Section mgr signature	PIC signature
Receipt		

ROM number

			1	Note: Pleas	e fill in all items marked *.
		Company	TEL		Submitted by
*	Applicant	Name	( )	aut	glad
		Date issued	Year / Month / Date  Date:	Applica	n l

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Please kindly verify and confirm the mask file in the submitted CD-R prior to submission.

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	☐ R5F212F4NXXXFP								
File Code									(hexadecimal notation)
Mask file name									.MSK (no more than 8 characters)

## CAUTION:

Note 1: ROM order of this product programs the Data Flash area.

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. There is no Engineering Sample, thus please confirm the ROM data at the receipt of the Initial product delivery.

Should you find any problem, please return immediately. 2 weeks without technical error feedback towards RENESAS will automatically be regarded as acceptance of products.

Note 3: Mask Option

A fixed mask option data (01<sub>16</sub>) must be written to the option data address (10<sub>16</sub>).

Note 4: Mark specification

Please refer to Figs. 1 about mark specification.

R5F212F 4NyyyFP XXXX

yyy : ROM number XXXX: Lot number

Fig. 1