

ENQUIRY FORM

(Design Input Record)

Please fill out this form with your artwork / sketch and contact our factory or our representative nearest to your region for custom designed LCD / LCM.



FAX: (852) 2499 5450

Customer's Info.

Company Name: \_\_\_\_\_ [Customer Reference No.: \_\_\_\_\_]  
 Contact Person: \_\_\_\_\_ Tel: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Application

Audio     Calculator     Instrument     Timepiece  
 Toy     Telecom     PDA     Others \_\_\_\_\_

Mode of Display

<p><b>Operation mode</b></p> <p><input type="checkbox"/> TN positive / negative</p> <p><input type="checkbox"/> HTN positive / negative</p> <p><input type="checkbox"/> STN yellow green</p> <p><input type="checkbox"/> STN grey</p> <p><input type="checkbox"/> STN blue</p> <p><input type="checkbox"/> FSTN</p>	<p><b>Display Condition</b></p> <p><input type="checkbox"/> Reflective type</p> <p><input type="checkbox"/> Transflective type</p> <p><input type="checkbox"/> Transmissive type</p> <p><input type="checkbox"/> Others _____</p>	<p><b>Viewing Direction</b></p> <p><input type="checkbox"/> 3 O'clock</p> <p><input type="checkbox"/> 6 O'clock</p> <p><input type="checkbox"/> 9 O'clock</p> <p><input type="checkbox"/> 12 O'clock</p> <p><input type="checkbox"/> Others _____</p>
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Outline Dimension

Length of Glass : _____	Pitch of Terminal Electrodes : _____
Width of Front Glass : _____	Glass Thickness : _____
Width of Rear Glass : _____	Connector Pin Length : _____
Length of Viewing Area : _____	Width between Pin Lines : _____
Width of Viewing Area : _____	

LCD Type

Graphic Type: _____ * _____ Dots	Character Type: _____ Character * _____ Lines
Dot Size: _____ * _____ mm	Character Font: _____ * _____ Dots
Dot Pitch: _____ mm	Character Pitch: _____ * _____ mm

Performance Specification

<p><b>Driving method</b></p> <p><input type="checkbox"/> Static    Driving voltage, Vop _____ V</p> <p><input type="checkbox"/> Multiplex    Driving frequency _____ Hz</p> <p>____ duty ____ bias    Driving LSI _____</p>	<p><b>Polarizer</b></p>	<p><b>Front polarizer</b></p> <p><input type="checkbox"/> Attached type</p> <p><input type="checkbox"/> Separated type</p> <p><input type="checkbox"/> Normal</p> <p><input type="checkbox"/> Anti-Glare</p> <p><input type="checkbox"/> Anti-UV</p> <p><input type="checkbox"/> Others</p>	<p><b>Rear polarizer</b></p> <p><input type="checkbox"/> Attached type</p> <p><input type="checkbox"/> Separated type</p> <p><input type="checkbox"/> Normal</p> <p><input type="checkbox"/> Anti-Glare</p> <p><input type="checkbox"/> Anti-UV</p> <p><input type="checkbox"/> Others</p>
<p><b>Enviromental conditions</b></p> <p>Operation temperature range: _____ °C ~ _____ °C</p> <p>Storage temperature range: _____ °C ~ _____ °C</p>			

LCM Type

COB     TAB     COG     Chip On Film     Zebra / Bezel  
 Pin     FPC     Heat Seal     Chip On Flex     Others \_\_\_\_\_

Outline Dimension

Length of Module : _____	Length of Display Area : _____
Width of Module : _____	Width of Display Area : _____
Length of Viewing Area : _____	Pitch of Terminal Electrodes : _____
Width of Viewing Area : _____	Module Thickness : _____

Back Light

LED     Others \_\_\_\_\_  
 EL     Not applicable

Schedule

<b>Sample</b>	<b>Mass production</b>
Delivery date: _____	Delivery date: _____
Quantity: _____ pcs	Quantity per month: _____ pcs