



Magnetics Design Specification Form (VoC)

Company: _____ Application: _____
 Contact: _____ Sales Contact: _____ Date: _____
 Address: _____ Sample Quantity: _____ Quote Only
 Phone: _____ Target Cost: _____
 Fax: _____ Email: _____ Estimated Annual Quantity: _____

GEOMETRY

ER 11/5-SG1 ER 14.5/6-SG2 EFD 15-SG3 EFD 17-SG4 EFD 20-SG5
 EE 8.3-SG6 EF 12.6-SG7 EE 13-SG8 SEE 16-SG9 Other _____

TOPOLOGY

Buck Boost Flyback Coupled Inductor Forward
 Gate Drive SEPIC Common Mode Other _____

Frequency Range: _____ Duty Cycle: _____ Continuous Discontinuous
 Input Voltage: _____ Power: _____
 Output Voltage(s) @ Continuous Current: _____

Design Priorities (1, 2 or 3)

Cost

Size

Efficiency

Inductance: _____ Input Switch Current (I_{pk}): _____
 Max. Ambient Temp.: _____ DC Resistance (DCR): _____
 Dielectric Withstanding Voltage (Hipot): _____
 Mounting (specify mounting pad or hole dimensions below): Surface Mount Thru-Hole
 Max. Dimensions (specify inches or mm) Length: _____ Width: _____ Height: _____
 Agency Approvals Required? Yes Agency and Document Number: _____
 Automotive Application? Yes AEC-Q200 Required? Yes Moisture Sensitivity? Yes Level: _____

ENVIRONMENTAL REQUIREMENTS

RoHS Compliance: 2002/95/EC Not Required Preferred Required
 Reach - PFOS & PFOA Compliance: 2006/122/EC Not Required Preferred Required
 Halogen Compliance: Cl<900ppm, Br<900ppm, Cl+Br<1500ppm Not Required Preferred Required

Critical Customer Requirements (include or attach schematic, notes and/or sketch):

Sample Ship To Address
 Name: _____, Company: _____
 Address: _____, City: _____, State: _____, Zip: _____