ROM number	

	Date:	
Receipt	Section mgr signature	PIC signature

RENESAS TECHNOLOGY
SINGLE-CHIP 16-BIT MICROCOMPUTER
R5F21332DNXXXFP
ROM PROGRAMMING CONFIRMATION FORM

Note: Please fill in all items marked ∗.

∗ Applicant	Company Name		TEL ( )	Applicant signature	Submitted by
	Date issued	Year / Month / Date Date:			

∗ 1. Mask file
Please kindly verify and confirm the mask file in the submitted floppy disk prior to submission.
The submitted floppy disk must be 3.5-inch 2HD type and DOS/V format. And the number of
the mask file must be 1 mask file per one floppy disk.

Part Number ☐ R5F21332DNXXXFP

File Code ☐☐☐☐☐☐☐☐ (hexadecimal notation)

Mask file name ☐☐☐☐☐☐☐☐ .MSK (no more than 8 characters)

∗ 2. Mask option
Set the mask option in the mask file generating utility as follows:

☐ <u>Address : 10h</u>   ☐ <u>Data : 01h</u>

∗ 3. ROM data which must be set by user
Check the option function select registers (OFS, OFS2) and ID code areas to be set for appropriate
values as ROM data.

☐ OFS register   ☐ OFS2 register   ☐ ID code areas

C A U T I O N :

Note 1 : 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 2 : Mark specification
Please refer to Fig. 1 about mark specification.

R5F2133
2DNyyy
XXXX

yyy : ROM number
XXXX : Lot number

Fig. 1