| ROM number | |

RENESAS ELECTRONICS
SINGLE-CHIP 16-BIT MICROCOMPUTER
R5F212F4DXXXFP
ROM PROGRAMMING CONFIRMATION FORM

Receipt	Date:	
	Section mgr signature	PIC signature

Note: Please fill in all items marked ∗.

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

∗ Mask file

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 ☐ R5F212F4DXXXFP

File Code [ ][ ][ ][ ][ ][ ][ ][ ] (hexadecimal notation)

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

C A U T I O N :

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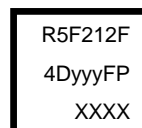Should you find any problem, please return immediately. 2 weeks without technical error feedback towards RENESAS will automatically be regarded as acceptance of products.

Note 3 : Mask Option
A fixed mask option data (01_{16}) must be written to the option data address (10_{16}) .

Note 4 : Mark specification
Please refer to Figs. 1 about mark specification.

R5F212F
4DyyyFP
XXXX

yyy : ROM number
XXXX: Lot number

Fig. 1