



SemiSyn
SemiconSynapsis

Name: _____
 Company: _____
 Address: _____

CARBON FIBER END EFFECTOR REQUEST FORM

APPLICATION AND PROCESS INFORMATION (fill out and check what applicable)

EQUIPMENT BRAND: _____ MODEL: _____

PROCESS APPLICATION: _____

ENVIRONMENT TEMPERATURE (°C): _____ WAFER TEMPERATURE: _____ HANDLING TIME (sec): _____

EXPOSURE TO CHEMICALS YES NO If YES please specify: _____

WAFER SIZE(s): _____ WAFER THICKNESS Min.: _____ μ Max.: _____ μ WEIGHT (Max.): _____ gr

WAFER BOW (Max.): _____ μ WAFER WARPAGE (Max.): _____ μ

TYPE OF HANDLING: Vacuum Mechanical If Vacuum, specify number of ports: _____

MOUNTING DETAILS (if needed specify): _____

OVERALL DIMENSIONS Length (Max.): _____ mm Width(Max.) _____ mm Thickness at tip: _____ mm

MATERIAL OF THE ORIGINAL: Ceramic: Metal: Carbon fiber: Other (specify): _____

A SEMISYN CODE EXISTS? If YES please give code: _____

ATTACHED DOCUMENTS: Drawings Scanned part (front side) Scanned part (back side)

PASTE HERE A SCANNING OF BOTH SIDES:



ASTEL Electronics and industrial automation
 Via Torino 253 – 10015 Ivrea (TO) – Italy
 Tel. +39-0125-230105 Fax +39-0125-1920112
 email: info@semisyn.com