

Product Discontinuation Notification (PDN)

Product group:	DRIVERS	Rev.:	0
No.:	PN23-068	Discontinuation of Older Type of the SKYPER 32 Pro	2023/08/22

Dear valued partner,

Thank you for using SEMIKRON products. Within our continuous improvement activities we are working to enhance performance, quality and reliability of our products. This notification is to inform you of a relevant change. We would like to express our sincere appreciation for your cooperation regarding the following changes and want to assure you that SEMIKRON will work closely with you to support your requirements during this transition.

Please respond to this notification by indicating your decision on the below approval form, sign it and return it to your SEMIKRON sales partner before 2023/09/22

Subject of change: **Discontinuation of older type of the SKYPER 32 Pro**

**SEMIKRON
product type:** L6100202 – SKYPER 32 PRO

**Description
of change:** Discontinuation of older type of the SKYPER 32 Pro.
Replacement type is:

SKYPER 32 PRO 2 nd edition	Article Nr.	
SKYPER 32 Pro 2 nd edition 12111	L5046001	

Reason for change: Portfolio alignment

Impact of change: N.A.

**Identification
of change:** N.A.

**Time schedule for
change:** N.A.

**Last Time order
date:** 2024/04/30

**Last time delivery
date:** 2024/12/31

Qualification: Semikron Danfoss standard qualification

**Supporting
documentation:** N.A.

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- Please respond to this notification by returning the attached customer approval form to your local sales partner.
- According to the standard J-STD-046 no response to this notification within 30 days after receipt constitutes acceptance of the change.

Products Affected:

The following table shows the affected products:

Part. No.	Description
L6100202	SKYPER 32 PRO R

Customer Approval Form for PN23-068 Rev. 0

Please check the appropriate box below:

☐ We agree with this proposed change and its schedule.

☐ We have objections:

Billing address:

Company:

Name:

Address:

Signature:

Date:

Customer
No.:

Supplier No. :

Signature/approval authority different from billing address?

Yes ☐

Company:

Name:

Address:

Signature:

Date:

Please return to your local SEMİKRON sales contact:

Name:

Phone:

E-mail:

Fax: