

PCN

AO-PCN-2022-033-A

Introduction of new chip for Radial SFH 2504, SFH 229 and SFH 229 FA product family

17.07.2023

Dear Customer,

please review this **PCN** and provide your feedback in the **Customer approval form** (at the end of this PCN document) to your ams OSRAM sales partner before **25.08.2023***).

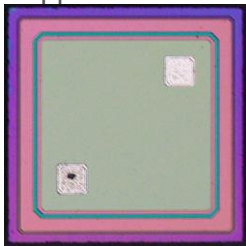
Your prompt reply will help ams OSRAM to assure a smooth and well executed transition. If ams OSRAM does not hear from your side by the due date, we will assume your (if you are a Distributor: and your customer's) full acceptance to this proposed change and its implementation.

ams OSRAM understands the time requirements your organization needs to approve this PCN. However, if you can provide ams OSRAM an estimated date your organization will have finalized this PCN review, ams OSRAM can use this date to plan continued production to secure your order needs during the transition time.

Your attention and response to this matter is highly appreciated.

Please direct your inquiries to your local Sales office.

- *) ams OSRAM aligns with the widely recognized JEDEC/ECIA/IPC Joint Standard No. 46, which stipulates:
- Customers should acknowledge receipt of the PCN within 30 days of delivery of the PCN.
 - Lack of acknowledgement of the PCN within 30 days constitutes acceptance of the change.
 - After acknowledgement, lack of additional response within the 90 day period constitutes acceptance of the change. If the customer requires additional time to perform sample testing, beyond the 90 day review period, an extension must be negotiated with the supplier.

Subject of change:	Introduction of new chip for Radial SFH 2504, SFH 229 and SFH 229 FA product family	
Affected products:	SFH 2504, SFH 229, SFH 229 FA	
Reason for change:	<ul style="list-style-type: none"> • Current chip supplier discontinued production. • New chip will be introduced to support future demands. 	
Description of change:	<u>Current status</u> Supplier A / Austria 	<u>New status</u> Supplier B / Taiwan 
	Wafer diameter: 150mm Chip size: 800µm x 800µm x 185µm	Wafer diameter: 150mm Chip size: 800µm x 800µm x 185µm
For details refer to document 2_cip_AO-PCN-2022-033-A_ext		
Product identification:	Date code	
Time schedule for PCN material: (after implementation of change):	Final qualification report:	available
	Samples available:	yes
	Intended Start of delivery:	28.08.2023 ^{*)} <small>*) or earlier if released by customer and upon mutual agreement</small>
Time schedule for Pre-PCN material: (prior to implementation of change):	Last time order date (LTO):	15.10.2023 ^{**)} <small>**) Lead time and LTO quantity shall be mutually agreed between ams OSRAM and customer.</small>
	Last time delivery date (LTD):	15.01.2024 ^{***)} <small>***) planned last date for delivery of products of current status</small>
Assessment:	The datasheet contents were reviewed and corrected accordingly (modifications were independent from the chip in use).	

Customer information package:
2_cip_AO-PCN-2022-033-A_ext

Qualification Report:
3_qual_AO-PCN-2022-033-A_ext

Documentation:

Datasheets:
4_cip_AO-PCN-2022-033-A_DS_SF2504_ext
5_cip_AO-PCN-2022-033-A_DS_SF229_ext
6_cip_AO-PCN-2022-033-A_DS_SF229FA_ext

Note:

Pre-PCN material: Products of current status, means before implementation of the changes as described in the PCN.

PCN material: Products with implementation of the changes as described in the PCN.

Customer approval form

AO-PCN-2022-033-A

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Please list product(s) affected in your application(s):

Please check the appropriate box below:

- | | |
|--|---|
| <input type="radio"/> Approval:
We agree with the proposed change and accept start of the shipment upon availability of PCN material | <input type="radio"/> Not relevant:
Change is not relevant for products in use. |
|--|---|

☐ **Change cannot be accepted:**

- ☐ **We have objections:**
- ☐ **We request following Information:**
- ☐ **We request following Samples:**
- ☐ **Expected approval date:**
- ☐ **Volume requirements for Pre-PCN material:**

☐ **Remarks:**

Sender:

Company:

Address / Location:

Signature:

Date:

Please return this approval form to your Sales partner.

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Tobelbader Strasse 30, 8141 Premstaetten, Austria
Phone +43 3136 500-0
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