Standardized Information for Process/Product Change Notification (PCN)

Standardized information for Frocess				
	1. PCN	l basic data		
1.1 Company TAIWAN SEMICONDUCTO	R			
1.2 PCN No.	PCN17019			
1.3 Title of PCN	Change of die size and	d change HF molding compound source		
1.4 Product Category	Active Components - Disc	crete Components	•	
1.5 Issue date	2017/07/17			
1.6 PCN revision history (optional)	1.7 Issue date of previous revision (optional)	1.8 Delta to previous revision (optional)		

2. PCN Team						
2.1 Contact supplier						
2.1.1 Name	Sunnie Pan					
2.1.2 Phone	+886-2-8913-1588 Ext:2205					
2.1.3 Email	sunnie@mil.ts.com.tw					
2.2 Team supplier (optional)						
2.2.1 Name (optional)	2.2.2 Phone (optional)	2.2.3 Email (optional)				
Stanley Lin	886-2-8913-1588 Ext.2104	stanleylin@mail.ts.com.tw				
Celia Huang	886-2-8913-1588 Ext.2125	celia@mail.ts.com.tw				

	3. Changes							
No.	3.0 Ident	3.1 Category	3.2 Type of change					
#1	SEM-PW-02	PROCESS - WAFER PRODUCTION	New wafer diameter					
#2	SEM-PW-03	PROCESS - WAFER PRODUCTION	New final wafer thickness					
#3	SEM-PA-11	PROCESS - ASSEMBLY	Change of mold compound / encapsulation material					
#4								
#5								

	4. Description of change						
	Old	New					
Change #1	SOD-723F Dice size and thickness: 0.37*0.37*0.18mm*1pcs	SOD-723F Dice size and thickness: 0.23*0.23*0.16mm*2pcs					
Change #2	SOD-523F&SOD-723F HF molding compound Supplier : A Type : A	SOD-523F&SOD-723F HF molding compound Supplier : B Type : B					
Change #3	SOT-23 & SOT-323 & SOD-123F HF molding compound Supplier : A Type : A	SOT-23 & SOT-323 & SOD-123F HF molding compound Supplier : C Type : C					
Change #4	SOD-323F HF molding compound Supplier : A Type : A	SOD-323F HF molding compound Supplier : D Type : D					
Change #5							
4.6 Anticipated impact on form, fit, function, reliability or processability?	Not impact the form, fit, function, reliability or proces	sability					
4.7 Reference parts with customer number (optional)							

5. Reason / motivation for change						
	Molding compound & Dice size & Thicknessc hange					
5.1 Motivation						
5.2 Additional explanation (optional)						

6. Marking of parts / traceability of change				
6.1 Description	Use date code to control			

7. Timing / schedule						
7.1 Date of qualification results	2017/04/18					
7.2 Last order date (optional)	2017/10/17					
7.3 Last delivery date (optional)	2018/10/17					
7.4 Intended start of delivery	2017/10/17					
7.5 Qualification samples available?	When get customer order and after 2 weeks can be submitted					
7.6 Customer feedback required until	2017/08/17					

8. Qualification / validation							
8.1 Description	According to JESD22						
(e.g. qual. plan/report, AEC-Q)							
8.2 Qualification report and	available (ass attachement)	issue date	2017/04/18				
qualification results	available (see attachement)						

	9. Input to customer for risk assessment process
Human Resource : Low Risk	
Equipment : Low Risk	
Technique-Wafer : Low Risk	
Technique-Assembly : Low Risk	
Sample submit time : within 30 days	
Form/ Fit / Function : Low Risk	
Reliability : Low Risk	

10.	Attachments (e.g. new da	tasheet, additional de	ocumentation, picture	es, process flow, sample	plan,)
Please see in the	official announcement mai	l.			

11. Affected parts									
	11.1 Current				11.2 New (if applicable)				
11.1.1 Customer Part No.	11.1.2 Supplier Part Name	11.1.3 Supplier Part No. (optional)	11.1.4 Package Name	11.1.5 Part Description (optional)	11.1.6 Additional Part Information	11.2.2 Supplier Part Name	11.2.3 Supplier Part No. (optional)	11.2.4 Package Name	11.2.6 Additional Part Information
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								1	

Company:

Custoi	ilei reeuback	Approval Form	Title of PCN:		
		Change of die size and	d change HF mole	ding compound s	source
	omer PCN No.		Suppli	er PCN No.	PCN17019
Please	check the app	propriate box below:			
	1. Feedback		date:		
	We agree wit	h this proposed change er will be sent in writter	e for the parts as	listed in chapt	er '11. Affected parts'.
		h this proposed change sent in written form afte		vill start with th	e PCN process. Approval
	We disapprov	/e because:			
	Remark:				
	2. Feedback		date:		
	We acknowle	dge qualification / valid	lation as assign	ed in chapter 8	of the PCN.
	We need mor	e information:			
	We need the	following samples:			
	Estimated clo	osing date for PCN:			
	Final Feedb	ack/Approval	date:		
	•		Sender:		

Name:	
Address/Location:	
Signature:	
Date:	
	Please return to: [your Sales partner]
Name:	
Address/Location:	
Phone:	
Fax:	
Email:	