

# INQUIRY FORM – CAPACITORS

Use this form to help provide application information to assist our technical sales. You can use this specific form for all high voltage ceramic capacitors.



## GENERAL INFORMATION

Company Name: \_\_\_\_\_  
Individual Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Request Date: \_\_\_\_\_  
Response Required Date: \_\_\_\_\_  
Build Location (City & Country): \_\_\_\_\_  
Final Application: \_\_\_\_\_

## DESIGN REQUIREMENTS

Replacing Existing Product? Yes  No  Manufacturer \_\_\_\_\_ Part # \_\_\_\_\_

Package Type: Radial Lead  Axial Lead  Doorknob

Required Package Dimensions: Diameter (D): \_\_\_\_\_ Thickness (T): \_\_\_\_\_ Lead Spacing (Ls): \_\_\_\_\_

Capacitance: *(Total capacitance required and/or unit capacitance)* \_\_\_\_\_ (pF)

Capacitance Tolerance: \_\_\_\_\_ (%)

Normal Operating Voltage *(Typical expect operating voltage of the capacitor)*: \_\_\_\_\_ (kV)

Maximum Voltage *(Expected maximum voltage that will be applied to the capacitor)*: \_\_\_\_\_ (kV)

Temperature Coefficient/Dielectric Material *(ex. Y5P, NP0, etc.)*: \_\_\_\_\_

Desired Voltage Coefficient/Capacitance Loss Over Applied Voltage: \_\_\_\_\_ ( $\Delta C/C\%$ )

Peak Current Normal *(Expected maximum discharge current during normal operation)*: \_\_\_\_\_ (kA)

Peak Current Fault *(Maximum current that can occur during incidental discharge)*: \_\_\_\_\_ (kA)

Inductance *(Approximate desired inductance of the capacitor)*: \_\_\_\_\_ (nH)

RMS Current: \_\_\_\_\_ (A)

### If Applicable:

Charge Time: \_\_\_\_\_ (s)

Hold Time: \_\_\_\_\_ (s)

Discharge Time: \_\_\_\_\_ (s)

Voltage Reversal Operational: \_\_\_\_\_ (%)

Voltage Reversal Fault: \_\_\_\_\_ (%)

## SCHEMATIC/WAVEFORM/ADDITIONAL NOTES: