

EMC QUESTIONNAIRE

QMF 17 Issue 17

RN Electronics Ltd

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Please use Questionnaire Notes (QMF17¹) to assist in completing this questionnaire.

Please E-Mail back to R.N. Electronics to estimate the test time required. Please complete clearly for each item to be tested, the answers will be used within your report after EMC testing. Equipment under test should be representative of production model.

1a Contact:	<input type="text"/>
1b Company:	<input type="text"/>
1c Address:	<input type="text"/>
	<input type="text"/>
1d Post Code	<input type="text"/>
1e Tel No:	<input type="text"/>
1f E-mail:	<input type="text"/>
1g Order No.	<input type="text"/>
1h Quality Manager:	<input type="text"/>
1i Q.M. E-mail	<input type="text"/>

2a EUT Name:	<input type="text"/>
2b Model No:	<input type="text"/>
2c Serial Number:	<input type="text"/>

Please ensure EUT is uniquely identified. If serial number is unavailable at this time please provide before test

3a Main function / operation of equipment	<input type="text"/>
3b Specific Use	<input type="text"/>
3c Country Of Origin	<input type="text"/>
3d Manufacturer	<input type="text"/>


4a Is support equipment required ?	<input type="text" value="Y/N"/>	4b If YES will you supply?	<input type="text" value="Y/N"/>
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4c Please give details

4d How many modes of operation does the unit have ?

4e Please Describe each mode:

1	<input type="text"/>
2	<input type="text"/>

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10 List <u>all</u> internal frequencies of the EUT. (Local oscillators, processors, clocks etc)			
<input type="text"/>			
11a Does the equipment contain a CRT monitor, Hall Elements, Magnetic Field Sensors etc. which may be susceptible to magnetic fields?		<input type="text" value="Y/N"/>	
11b Is surge protection fitted to the supply or any signal ports ? (please detail below)		<input type="text" value="Y/N"/>	
<input type="text"/>			
12a Please detail the EMC standard & date of issue you would like the equipment tested to; alternatively check the box below if you would like advice about the most applicable standard(s).			
<input type="text"/>			
12b I would like advice about the most applicable standard(s) on test confirmation:			<input type="checkbox"/>
13a Is a test report required ?		<input type="text" value="Y/N"/>	13b Report Style required ?
			<input type="text" value="Electronic / Paper"/>
13c If you require a different company name and address on the test report please enter it here:		<input type="text"/>	
14 Our Quotation is based on the information supplied to us. Incorrect information may lead to extra charges if insufficient time has been allocated to you.			
Signature:	<input type="text"/>	Date:	