



Brite-LED Optoelectronics
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PRODUCT APPLICATION REVIEW SHEET

General Data		
Company:		Project Ref.
Address:		Date:
		Submitted by:
Contact Name:		Phone:

Desired / Required Technical Specifications	
Package type or size: (through-hole; SMD, etc)	Emitted color / Wavelength: (specify λ peak or dominant)
Package features: (w/ stoppers, formed leads, etc)	Desired Wavelength Tolerance: (+/- nm)
Lens Type: (clear, diffused, etc)	Full Viewing Angle(s) ($2\theta\frac{1}{2}$):
Luminous Intensity (I_v) or Radiant Flux (P): (mcd or mW or other units)	Intended Drive current: (mA DC)
	Available Supply Voltage: (V)
Operating Time: (On / Off or continuous)	Intended Operating Temperature Range: ($^{\circ}$ C)
Additional requirements, comments, features or details: 	
Other manufacturer part number to use as reference: 	

Attach a drawing or specification sheet if necessary.

We appreciate your interest in our products and look forward to helping you meet your requirements. If you have any questions or need any help, please do not hesitate to contact us at any time.

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