

Customer Requirement Confirmation Form Version: 1.2.0.0

*This PDF is editable and does not require printing.

Company Name: _____	
Applicant: _____	Tel: _____ E-mail: _____
Lens Working Distance: _____ mm (*Required)	
Light Source Working Distance: _____ mm (*Required)	
Imaging Field of View (FOV): _____ mm x _____ mm (*Required)	
Camera Resolution (µm/pixel): _____ (*Required)	
Material of the Object to be Tested (*Required) : <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Other (Please specify for proper light source selection)	
Required Light Source Model: _____ Quantity: ____ PCS Color: <input type="checkbox"/> White <input type="checkbox"/> Red <input type="checkbox"/> Blue <input type="checkbox"/> IR850 <input type="checkbox"/> IR940 <input type="checkbox"/> UV	
Matched Dimmer: _____ CH <input type="checkbox"/> Manual <input type="checkbox"/> RS-232 Program Control	
Special Requirements for Light Source: <input type="checkbox"/> None <input type="checkbox"/> HighBrightness <input type="checkbox"/> HighUniformity	<input type="checkbox"/> High Collimation (Parallel Light) or <input type="checkbox"/> High Diffusion (Diffuse Light)
Preference: <input type="checkbox"/> None <input type="checkbox"/> Price-Oriented <input type="checkbox"/> Performance-Oriented	
Estimated Mass Production Timeline (yy/mm/dd, ex: 2026/05/01): _____	
Annual Demand Quantity: <input type="checkbox"/> 1 - 10 PCS <input type="checkbox"/> 10 - 50 PCS <input type="checkbox"/> 50 - 100 PCS <input type="checkbox"/> Over 100 PCS	
Current Lighting Issues: <input type="checkbox"/> None <input type="checkbox"/> Insufficient Brightness <input type="checkbox"/> Uneven Illumination <input type="checkbox"/> Unable to Highlight Features <input type="checkbox"/> Other: _____	
Other Requirements or Issue Description (*Required-please provide clear details for proper light source selection): 1. What defects are being inspected? (e.g., dimensional measurement, contamination, scratches, etc.) 2. What light source is currently being used? 3. What lighting issues are you encountering? What improvements are needed?	

Approved by: _____ Responsible Sales: _____ Sales Assistant: _____