

Product / Process Change Notice

PCN No.: Q000-PCN-DL201509-01

Date: 2015-09-10.

Change Title: Internal SPI flash type change for I1510x products

Change Classification: Major Minor

Change item: Design Raw Material Wafer FAB Package Assembly Testing Others: _____.

Affected Product(s) :

The affected products are I15102FYI and I15104FYI.

Description of Change(s) :

- Flash Memory ID:

Affected Product	Before Change	After Change
	Flash Memeory ID	Flash Memeory ID
I15102FYI	2EF4013	1EF4013
I15104FYI	2EF4014	2EF4014

- Erase Time :

Products Affected	Before Change		After Change	
	Typical Chip Erase Time	Typical Sector Erase Time	Typical Chip Erase Time	Typical Sector Erase Time
I15102FYI	1s	30ms	1s	30ms
I15104FYI	2s	30ms	2s	45ms

Reason for Change(s) :

Due to advancement in I15102FYI and I15104FYI internal flash memory process technology.

Impact of Change(s) : (positive & negative)

Form: No change.

Fit: No change.

Function: No change.

Reliability: No concern.

Qualification Plan/ Results :

- This PCN is the formal announcement of the change in products' internal flash type.
- The products' performance verification by Nuvoton's outgoing final test and evaluation board test showed no difference.
- Samples are available for customer qualification and evaluation.

Implementation Plan :

Date Code: _____ onward Lot No.: _____ onward Implemented date: Dec. 09, 2015 (scheduled)

Originator:	<i>H.Y. Lai / Q100</i>	Approval:(QA Director)	<i>K.L. Lin/ Q000</i>
Contact for Questions & Concerns	Name: <u>HYLai</u> TEL: <u>886-3-5770066 (ext. 1226)</u> FAX: <u>886-3-5792673.</u> Address: <u>No.4, Creation Rd. III Science-Based Industrial Park Hsinchu, Taiwan, R.O.C..</u> E-mail: <u>hylai0@nuvoton.com.</u>		

Customer Comments:

Note: Please sign this notice, and return to **Nuvoton** contact within **30** days. If no response is received within **30** days, this Change Request will be assumed to meet your approval.

Approval Disapproval Conditional Approval: _____.

Date: _____ Dept. name: _____ Person in charge: _____.

Follow-up and Tracing:

A. copies to

FAB: Integration _____ _____ _____ _____.

Test / Product: _____ _____ _____ _____.

Design/ Marketing: _____ _____ _____ _____.

Production control/ Others: _____ _____ _____ _____.

B. Changes:

1. Document / Test program:

Document No/ test program	Document name/ test program name	version		responsibor	Completed date	Remark
		before	after			
NA	NA	NA	NA	NA	NA	NA

Verified by: _____.