

CoaxPress Electrical Compliance Test At TIRI Application form

Date of Application	mm	3	/dd	15	/yyyy	2012	/
Company:	Japan Industrial Imaging Corp						
Name:	Taro JIIA						
e-mail:	info@jia.org						
Tel:	+81-3-3716-3933			Fax:	+81-3-3716-3933		
Address:	2-10-15, Nakameguro, Yamate Ave. K Bldg., Meguro, Yokyo 153-0061 Japan						
Member ship	<input checked="" type="checkbox"/> JIIA <input type="checkbox"/> AIA <input type="checkbox"/> EMVA <input type="checkbox"/> Non						
Contact in Japan							
Company:	Japan Industrial Imaging Association						
Name:	Sigeo JIIA						
e-mail:	info@jia.org						
Tel:	+81-3-3716-3933			Fax:	+81-3-3716-3933		
Address:	2-10-15, Nakameguro, Yamate Ave. K Bldg., Meguro, Yokyo 153-0061 Japan						

Desired Test Date and Time Slot:	1st	3 /mm	29 /dd	2012 /yyyy	A.M.(3h) / P.M.(3h) / One full day
	2nd	3 /mm	30 /dd	2012 /yyyy	A.M.(3h) / P.M.(3h) / One full day
1 day / 2 days	3rd	4 /mm	2 /dd	2012 /yyyy	A.M.(3h) / P.M.(3h) / One full day

Test Product / Name	Model	Q'ty	Description
Device Host/Cable/	JIIA-CXP-family (JIIA-CXP-2M60, JIIA-CXP-4M30)	2	Link Speed: CXP 1, 2, <u>3</u> , 5, 6 Max Link: <u>Single</u> , Dual, Quad Power over <u>Yes</u> / No

Please indicate 3 desired test date and time slots (Facilities may not be available for particular date) Cost for the test will be quoted depending on the time slot that you request. Please fill "Product Name" column with the name of product series/Model code you request a trial. And enter the number of products need to be tested examined in "Q'ty" column.

For JIIA Action Only (Do Not Complete)			
Application received:	/	/	TARI Rep:
Test Date:	/	/	Quotation:TARI/Rental /
Invoice date:	/	/	Payment: / /
Registration:	/	/	Action Complete: / /