Lyber www.cyber-laser.com

**Laser Solutions** 

# Preparatory questions for providing our solution

Thank you very much for your inquiry.

In order to provide our solution in the most adequate manner, we would like to ask you for some previous information.

Though not all questions need to be answered at this stage, adequate information would help us develop good working relationship in a swift manner.

Please fill out the following questions.

Date of Request / /

#### 1. Customer Information

Your company name	 
Department	
Contact person	
Phone	 -
Fax	 -
e-mail	

#### 2. Non-Disclosure Agreement (NDA)

We are ready to prepare NDA documents if necessary.

NDA 🗆 necessary 🛛 unnecessary

If necessary

the nature of the confidential information

the name of the document

the number of documents to be covered by the NDA

(E.g. requirement specifications, technical specifications

#### 3. Purpose

Please indicate the purpose of the collaboration to the extent possible at this stage.

In case of consultation requests which do not involve sample processing, please skip the following sections and move onto section 8.

# 4. Sample(s) to be processed

#### 4.1. Sample information

Material

Form

Dimensions, size

Cross-sectional structure (model diagram) Please uses additional pieces of paper if necessary.

any additional information

#### 4.2. Application of the processed sample

Please indicate how the above sample is used if possible.

## 5. Required Specifications of the laser to be used in the process

if not clear, please leave this space blank.

#### 5.1. Laser Type

□ Femtosecond Laser		□UV Laser	□ Green Laser
□Other(	)		

#### 5.2. Laser specifications

Please indicate your requirements here.

The type of laser (wavelength, power)

□CW continuous wave,	□pulse (frequency _	Hz, pulse width	, energy)
any other requirements			

# 6. Type of Processing

Please indicate the type of processing being requested, as well as process conditions if any.

Process Diagram (model diagram) Please use additional pieces of paper if necessary.	

Please indicate what is considered most important in this process; e.g. the size of process area, quality of the processed face.



#### 7. Observation of the process

Please inform if you would like to observe the processing in progress. Please note that additional fees will be charged and that we may not be able to meet your request depending on the type of solution.

□Observation requested □not requested

#### 8. Consultation

Skip if not applicable

Please indicate your requirements concerning the consultation.

Please use additional pieces of paper if necessary.

### 9. Form of Report

Please indicate the requested form of report (additional fees necessary)

□Report by document only

□Report by document as well as presentation and visit

### 10. Requested date of delivery

Requested date of delivery;

(Depending on various conditions, we may ask you to shift the timeline.)

Requested date of delivery / /

. Additio	nal requests,	, questions,	etc.		

<Please list if any>

<Contact at Cyber Laser>

Marketing Department

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