

CAPACITOR APPLICATION DATA

Please fill out, print and fax this form to Elwood HVC at (414) 764-4298.

Name: _____

Date: _____

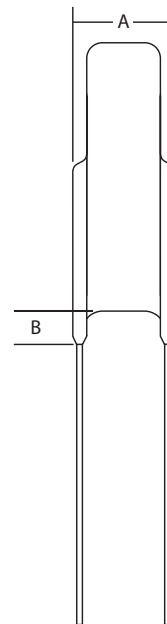
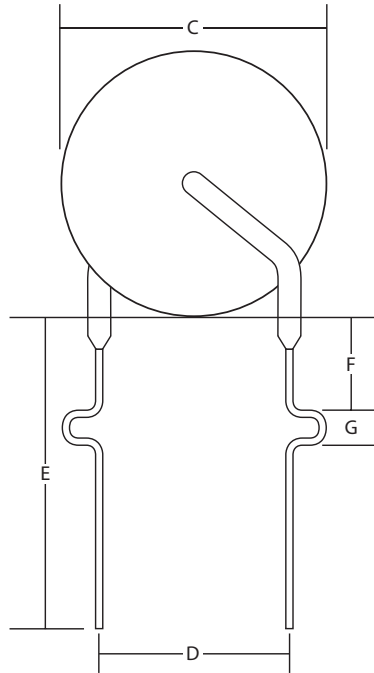
Company Name: _____

Company Address: _____

Phone: _____

Email: _____

Project Name: _____



CHARACTERISTICS:

Capacitance: _____ (specify pF or μ F)

Tolerance: _____ %

Frequency: _____ (1KHz or 1MHz)

Working Voltage: _____ KVDC

Test Voltage: _____ KVDC

Dissipation Factor (D.F.): _____

Temp. Characteristics (t.c.): _____

Corona Start: _____

DIMENSIONS:

A: _____ Max.

B: _____ Min. (0.13" typical)

C: _____ Max.

D: _____ (1/4", 3/8", 1/2" typical)

E: _____ Min. (1.00" Min. typical)

F: _____ (N/A - For No Kink)

G: _____ (N/A - For No Kink)

Wire AWG: _____ (20AWG typical)

Special Instructions: _____



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