



**C.E. Precision Assemblies, Inc.
CABLE ASSEMBLY QUESTIONNAIRE**

Directions: Fill in or circle where appropriate. To ensure quick response, complete as fully as possible and email to info@cepainc.com or fax to (480) 961-4754.

Customer Information:

Company Name: _____
 Contact and Title: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Country: _____
 Telephone Number: _____ Fax Number: _____
 E-Mail Address: _____ Website: _____

Mechanical Information:

1. Assembly length (end to end or right angle centerline) _____ inch mm

2. Connector 1 _____ Connector 2 _____
 _____ Series (ex. SMA, TNC, BNC, GPO, etc)
 _____ Center Contact (Ex: Male or Female)
 _____ Configuration (Straight, Right Angle, Bulkhead)

3. Cable _____ (If unknown, fill out lines 4, 5, 9 - 13 as applicable)

4. Maximum cable outside diameter: _____ inch mm

5. Minimum bend radius: _____ inch mm

6. Number of markers: _____

7. Environment: indoor outdoor constant flexing occasional flexing stationary

8. Describe any other mechanical or environmental requirements: _____

Electrical Information:

1. Frequency range of operation _____ GHz MHz

2. Maximum power handling _____ watts at _____ GHz MHz

3. Maximum attenuation of cable assembly _____ dB at _____ GHz MHz

4. Maximum VSWR (Ex: 1.3:1) or expressed in dB of Return Loss _____ dB

5. Minimum shielding or isolation required _____ dB

6. Phase matching (if required) ± _____ Degrees at _____ GHz MHz

Application Information:

1. Program Name: _____

2. Quote required? Yes No Quotation Qty: _____ Date Required: _____

3. Samples Required? Yes No Sample Qty: _____ Complete Date: _____

4. Total Production Quantity: _____ Start Date: _____ Complete Date: _____

5. Alternative products or technologies being considered: _____

