Model International Form	For Office use only
Under the Patent Law Treaty (PLT)	
*	
REQUEST FOR RECORDATION OF CHANGE IN APPLICANT OR OWNER	
	Reference indication of person making the request
* Indicate name of national or regional patent Office with which the recordation is requested.	(if desired):
Box No. I APPLICATION(S) AND/OR PATENT(S) CONCERNED	
The present request concerns the following application(s) and/or patent(s): Application number(s)*:	
Patent number(s):	
*Where the application number has not yet been issued or is not known to the applicant of (i) the provisional application number (if any) given by the Office, (ii) a copy of the requapplication was sent to the Office, or (iii) a reference number given to the application by of the applicant, the title of the invention and the date on which the application was sent	est part of the application along with the date on which the the applicant or his representative along with the name and address
Further applications and/or patents concerned are indicated on addition	al sheet No
Box No. II EXTENT OR SCOPE OF TRANSFER OF OWNERSHIP	
Total transfer of ownership	
Partial transfer of ownership	
Further information concerning a partial transfer of ownership is provided on a	dditional sheet No
Box No. III APPLICANT(S) AND/OR OWNER(S) WHOSE OWNERS	SHIP WAS TRANSFERRED
Name and address: (Family name followed by given name; for a legal entity, full offic designation. The address must include postal code and name of country. The country of address indicated in this Box is the country of residence.)	
	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
Further applicants and/or owners whose ownership were transferred are	e indicated on the following sheet: Continuation of Box

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR OWNER(S) WHOSE OWNERSHIP WAS TRANSFERRED		
If none of the following sub-boxes is used, this sheet should not be included in the req	uest.	
Name and address:	Telephone No.	
	Facsimile No.	
	E-mail address	
	Registration No. or other indication registered with the Office	
Name and address:	Telephone No.	
	Facsimile No.	
	E-mail address	
	Registration No. or other indication registered with the Office	
Name and address:	Telephone No.	
	Facsimile No.	
	E-mail address	
	Registration No. or other indication registered with the Office	
Name and address:	Telephone No.	
	Facsimile No.	
	E-mail address	
	Registration No. or other indication registered with the Office	
Name and address:	Telephone No.	
	Facsimile No.	
	E-mail address	
	Registration No. or other indication registered with the Office	

Box No. IV REPRESENTATIVE(S) OF THE APPLICANT(S) AND/OR OWNER(S) WHOSE OWNERSHIP WAS TRANSFERRED		
Name and address:	Telephone No).
	Facsimile No	
	E-mail addres	ss
	Registration I with the Office	No. or other indication registered te
The power of attorney		ttorney (No) e possession of the Office
Further representatives are indicated on the following sheet:	Continuation of Box No. IV	
Box No. V ADDRESS FOR CORRESPONDENCE OR LEG. WHOSE OWNERSHIP WAS TRANSFERRED	L SERVICE OF THE APPLIC	ANT(S) AND/OR OWNER(S)
Box No. VI APPLICANT(S) AND/OR OWNER(S) TO WHOM THE OWNERSHIP WAS TRANSFERRED		
Name and address: (Family name followed by given name; for a legal enti- designation. The address must include postal code and name of country. The address indicated in this Box is the country of residence.)).
	Facsimile No	
	E-mail addres	SS
	Registration with the Office	No. or other indication regsitered
State of nationality:	State of residence:	
Further applicants and/or owners to whom ownership were tr Continuation of Box No. VI	nsferred are indicated on the follo	wing sheet:

Continuation of Box No. IV FURTHER REPRESENTATIVE(S) OF THE APPLICANT(S) AND/OR OWNER(S) WHOSE OWNERSHIP WAS TRANSFERRED If none of the following sub-boxes is used, this sheet should not be included in the request. Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office The power of attorney Appointment was made on the request The power of attorney (No.) is enclosed form when the application was filed is already in the possession of the Office Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office The power of attorney (No.) The power of attorney Appointment was made on the request is already in the possession of the Office is enclosed form when the application was filed Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office Appointment was made on the request The power of attorney (No.) The power of attorney is enclosed form when the application was filed is already in the possession of the Office Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office The power of attorney Appointment was made on the request The power of attorney (No.) form when the application was filed is enclosed is already in the possession of the Office

Continuation of Box No. VI FURTHER APPLICANT(S) AND/OR OWNER(S) TO WHOM THE OWNERSHIP WAS **TRANSFERRED** If none of the following sub-boxes is used, this sheet should not be included in the request. Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office State of residence: State of nationality: Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office State of residence: State of nationality: Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office State of residence: State of nationality: Telephone No. Name and address: Facsimile No. E-mail address Registration No. or other indication registered with the Office State of nationality: State of residence:

Box No. VII REPRESENTATIVE(S) OF THE APPLICANT(S) AND/OR OWNE WAS TRANSFERRED	ER(S) TO WHOM THE OWNERSHIP	
Name and address:	Telephone No.	
	Facsimile No.	
	E-mail address	
	Registration No. or other indication registered with the Office	
The power of attorney is enclosed Appointment was made on the request form when the application was filed	The power of attorney (No) is already in the possession of the Office	
Further representatives are indicated on the following sheet: Continuation of Bo	x No. VII	
Box No. VIII ADDRESS FOR CORRESPONDENCE OR LEGAL SERVICE OF TO WHOM THE OWNERSHIP WAS TRANSFERRED	THE APPLICANT(S) AND/OR OWNER(S)	
Box No. IX DOCUMENTATION OF THE BASIS FOR THE CHANGE IN APP	PLICANT(S) AND/OR OWNER(S)	
(a) The change in applicant or owner results from a contract		
(i) One of the following documents is enclosed:		
□ a copy of the contract □ a copy, certified as being in conformity with the original, of the contract		
an extract of the contract		
an extract, certified as being a true extract, of the contract		
☐ a certificate of transfer of ownership by contract		
(ii) Information relating to the registration of the contract (where registration	is compulsory under the applicable law)	
(b) The change in applicant or owner results from a merger, or from the reorganiz	ation or division of a legal entity	
One of the following documents, evidencing the merger, reorganization or divrights involved, is enclosed:	ision of the legal entity and any attribution of	
a copy of an extract from the register of commerce		
a copy, certified as being in conformity with the original, of an extract from	m the register of commerce	
other document or certified document originating from a competent author	rity (specify)	
(c) The change in applicant or owner results from a ground other than specified in law or a court decision)		
a copy, or a copy certified as being in conformity with the original, of a do (specify)	-	

Continuation of Box No. VII FURTHER REPRESENTATIVE(S) OF THE APPLICANT(S) AND/OR OWNER(S) TO WHOM OWNERSHIP WAS TRANSFERRED				
If none of the following sub-bo	oxes is used, this sheet should not be included in	the reque	est.	
Name and address:			Telephone No.	
			Facsimile No.	
			E-mail address	
			Registration No. or other indication registered with the Office	
The power of attorney is enclosed	Appointment was made on the request form when the application was filed		The power of attorney (No) is already in the possession of the Office	
Name and address:			Telephone No.	
			Facsimile No.	
			E-mail address	
			Registration No. or other indication registered with the Office	
The power of attorney is enclosed	Appointment was made on the request form when the application was filed		The power of attorney (No) is already in the possession of the Office	
Name and address:			Telephone No.	
			Facsimile No.	
			E-mail address	
			Registration No. or other indication registered with the Office	
The power of attorney is enclosed	Appointment was made on the request form when the application was filed		The power of attorney (No) is already in the possession of the Office	
Name and address:			Telephone No.	
			Facsimile No.	
			E-mail address	
			Registration No. or other indication registered with the Office	
The power of attorney is enclosed	Appointment was made on the request form when the application was filed		The power of attorney (No) is already in the possession of the Office	

Box No. X	DATE OF THE CHANGE:
Box No. XI	INFORMATION RELATING TO ANY GOVERNMENT INTEREST
Box No. XII	STATEMENT INDICATING THAT THE INFORMATION CONTAINED IN THE PRESENT DOCUMENT
	IS TRUE AND CORRECT
Box No. XIII	ENCLOSURE(S)
Power	of attorney (Box No. IV and/or VII)
Docum	nentation of the basis of change in applicant or owner (Box No. IX) and its translation, if necessary
Conse	nt to the change by a co-applicant or co-owner in respect of whom there is no change in ownership
Separa applic	ate copy(copies) of the request for each application and/or patent concerned, where the request relates to more than one ation or patent
Others	s (specify)
Box No. XIV	SIGNATURE OR SEAL; DATE
Next to each s	ignature or seal, indicate the name of the person signing or sealing, the capacity in which the person signs or seals (if such
	obvious) and the date of signature or of seal