

**REQUEST FOR GRANT OF A
PHILIPPINE PATENT**

Our Ref.: /

(The Following is to be filled in by the
Intellectual Property Office)

APPLICATION NO.:

**THE UNDERSIGNED HEREBY REQUEST GRANT OF A
PHILIPPINE PATENT FOR THE SUBJECT APPLICATION.**

FILING DATE :

DATE OF RECEIPT:

Box No. I TITLE OF THE INVENTION:

Box No. II APPLICANT. (WHETHER OR NOT ALSO INVENTOR). Use this box for indicating the applicant or, if there are several applicants, one of them. If more than one person (includes, where applicable, a legal entity) is involved, continue in supplemental box.

The person in this box is (check one only) applicant and inventor applicant only

Name and address:

Telephone number:
(including area code)

Fax address:

E-Mail Address:

Country of nationality:

Country of residence:

:

Box No. III INVENTOR/S. A separate sub-box has to be filled-in in respect of each person. If the following two sub-boxes are insufficient, continue in the "Supplemental Box" (giving there for each additional person the same indications as those requested in the following two sub boxes) or by using a "continuation sheet."

The person in this box is (check one only): applicant and inventor inventor only

Name and address:

If the person identified in this sub-box is applicant (or applicant and inventor), indicate also:

Country of nationality:

Country of residence:

The person identified in this sub-box is (check one only): applicant and inventor inventor only

Name and address:

If the person identified in this sub-box is applicant (or applicant and inventor), indicate also:

Country of nationality:

Country of residence:

CLIENT NO:

IPO-BP Form 1

Box No. IV AGENT (IF ANY) OR COMMON REPRESENTATIVE (IF ANY). ADDRESS FOR NOTIFICATIONS (IN CERTAIN CASES) A common representative may be appointed only if there are several applicants and if no agent is or has been appointed: The common representative must be one of the applicants
 The following person (includes, where applicable, a legal entity) is hereby/has been appointed as agent or common representative to act on behalf of the applicant(s) before the Intellectual Property Office

Name and address, including postal code:

BUCOY POBLADOR & ASSOCIATES
 21st Floor, Chatham House
 116 Valero Corner Herrera
 Salcedo Village, Makati City
 Philippines

Telephone number
 (including area code)

(632) 887-5905/887-5910/887-5933

Fax No.:

(632) 8453870

(632) 8453871

(632) 8453872

E-Mail address:

poblaw95@info.com.ph

Box No. V PRIORITY CLAIM (IF ANY). The priority of the following earlier application(s) is hereby claimed

Country in which it was filed:	Filing Date (month, day, year)	Application No.
(1)		
(2)		
(3)		

Box No. VI SIGNATURE OF APPLICANT(S) OR AGENT OVER PRINTED NAME(S).

BUCOY POBLADOR & ASSOCIATES

BY:

If the present Request form is signed on behalf of any applicant by an agent, a separate notarized power of attorney appointing the agent and signed by the applicant is required. If in such case it is desired to make use of a general power of attorney (deposited with the Intellectual Property Office), a copy thereof must be attached to this form

Box No. VII CHECK LIST. (To be filled in by the Applicant)

This application contains the following number of sheets

- 1. Request sheets
- 2. Description. sheets
- 3. Claims. sheets
- 4. Abstract. sheets
- 5. Drawing(s) sheets
- Total sheets

This application as filed is accompanied by the items checked below

- 1. separate notarized power of attorney
- 2. copy of general power of attorney
- 3. priority document(s) (see Box No. V)
- 4. cheques for the payment of fees
- 5. other documents (specify)

Figure number _____ of the Drawings (if any) is suggested to accompany the abstract for publication