REQUEST FOR THE REGISTRATION OF A UTILITY MODEL

	(The following is to be filled in by the			
	Intellectual Property Office)			
	APPLICATION No.:			
	EW DVG D A EED			
THE UNDERSIGNED HEREBY REQUEST THAT THIS UTILITY MODEL APPLICATION BE REGISTERED.	FILING DATE:			
	Date of Receipt:			
Box No. I TITLE OF THE UTILITY MODEL				
Box No. II APPLICANT (WHETHER OR NOT ALSO MAKER) Use this box for indicating the applicant or, if there are several applicants, one of them. If more than one person (include, where applicable, a legal entity)				
is involved, continue in the supplemental box.				
The person in this box is (check one only): [] applicant and make Name and address:	r [] applicant only			
Telephone number: Fax Number:	E-Mail address:			
(including area code)				
Country of nationality: Country of residence:				
Box No. III MAKER/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 then	rein for each additional person the same			
indications as those requested in the following two sub-boxes) or by us	sing a "continuation sheet".			
The person in this box is (check one only): [] applicant and maker [] maker only Name and address:				
If the person identified in this sub-box is applicant (or applicant and maker), indicate also: Country of nationality: Country of residence:				
Country of nationality.	sidence.			
The person identified in this box is (check one only): [] applicant as	nd maker [] maker only			
Name and address:	[]to. 5y			
If the person identified in this sub-box is applicant (or applicant and maker), indicate also:				
Country of nationality: Country of residence:				

(Revision 01) (March 2015)

*The applicant/agent shall inform the office of any change in the address/es indicated to ensure receipt of communications.

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 (include, 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:						
Telephone number: Fax No.: (including area code)	E-Mail address:					
Box No. V PRIORITY CLAIM (IF ANY) The priority of the Country in which it was filed: Filing Date Application No (month, day, y						
(1)(2)						
(3)						
Box No. VI SIGNATURE OF APPLICANT(S) OR AGEN	TT OVER PRINTED NAME(S)					
If the present Request form is signed on behalf of any applicant be appointing the agent and signed by the applicant is required. If in of a general power of attorney (deposited with the Intellectual form.	such case it is desired to make use					
Box No. VII CHECK LIST (To be filled in by the Applican	t)					
This application contains the following number of sheets: 1. Request 2. Description: 3. Claim(s): 4. Abstract: 5. Drawing(s): 6. □ Sequence Listing (Paper):	This application as filed is accompanied by the items checked below. Separate notarized power of attorney Copy of general power of attorney Priority document(s) (see Box No. V) Cheques for the payment of fees Physical data carrier containing Sequence					
☐ Sequence Listing (PDF OCR): Total Sheets: Figure number(s) of the drawings (if any)	Listing in PDF OCR ☐ Other documents (specify)					
is suggested to accompany the abstract for publication.						