

# Model International Form Under the Patent Law Treaty (PLT)

For Office use only

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## REQUEST FOR

**RECORDATION OF A SECURITY INTEREST**

**CANCELLATION OF THE RECORDATION  
OF A SECURITY INTEREST**

\* Indicate name of national or regional patent Office with which the recordation is requested.

Reference indication of person making the request (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 or representative, that application may be identified by furnishing (i) the provisional application number (if any) given by the Office, (ii) a copy of the request part of the application along with the date on which the application was sent to the Office, or (iii) a reference number given to the application by the applicant or his representative, along with the name and address of the applicant, the title of the invention and the date on which the application was sent to the Office*

Further applications and/or patents are indicated on additional sheet No. ....

### Box No. II PERSON(S) PROVIDING THE SECURITY INTEREST CONCERNED

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the country of residence.)*

Telephone No.

Facsimile No.

E-mail address

Registration No. or other indication registered with the Office

Further persons providing the security interest concerned are indicated on the following sheet: Continuation of Box No. II

### Box No. III REPRESENTATIVE OF THE PERSON(S) PROVIDING THE SECURITY INTEREST CONCERNED

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 of the person providing the security interest concerned are indicated on the following sheet: Continuation of Box No. III

**Continuation of Box No. II FURTHER PERSON(S) PROVIDING THE SECURITY INTEREST CONCERNED**

*If none of the following sub-boxes is used, this sheet should not be included in the request.*

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
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	Facsimile No.
	E-mail address
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	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
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	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

**Continuation of Box No. III FURTHER REPRESENTATIVE(S) OF THE PERSON(S) PROVIDING THE SECURITY INTEREST CONCERNED**

*If none of the following sub-boxes is used, this sheet should not be included in the request.*

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. IV ADDRESS FOR CORRESPONDENCE OR LEGAL SERVICE OF THE PERSON(S) PROVIDING THE SECURITY INTEREST CONCERNED**

**Box No. V PERSON(S) ACQUIRING THE SECURITY INTEREST CONCERNED**

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the country of residence.)*

Telephone No.

Facsimile No.

E-mail address

Registration No. or other indication registered with the Office

State of nationality:

State of residence:

Further persons acquiring the security interest concerned are indicated on the following sheet: Continuation of Box No. V

**Box No. VI REPRESENTATIVE OF THE PERSON(S) ACQUIRING THE SECURITY INTEREST CONCERNED**

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 of the person(s) acquiring the security interest concerned are indicated on the following sheet: Continuation of Box No. VI

**Box No. VII ADDRESS FOR CORRESPONDENCE OR LEGAL SERVICE OF THE PERSON(S) ACQUIRING THE SECURITY INTEREST CONCERNED**

**Continuation of Box No. V FURTHER PERSON(S) ACQUIRING THE SECURITY INTEREST CONCERNED**

*If none of the following sub-boxes is used, this sheet should not be included in the request.*

Name and address:	Telephone No.
	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
State of nationality:	State of residence:
Name and address:	Telephone No.
	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
State of nationality:	State of residence:
Name and address:	Telephone No.
	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
State of nationality:	State of residence:
Name and address:	Telephone No.
	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
State of nationality:	State of residence:
Name and address:	Telephone No.
	Facsimile No.
	E-mail address
	Registration No. or other indication registered with the Office
State of nationality:	State of residence:

**Continuation of Box No. VI FURTHER REPRESENTATIVE(S) OF THE PERSON(S) ACQUIRING THE SECURITY INTEREST CONCERNED**

*If none of the following sub-boxes is used, this sheet should not be included in the request.*

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

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	Facsimile No.
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  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. VIII INFORMATION ON THE SECURITY INTEREST AGREEMENT CONCERNED**

A. If the present request is a request for recordation of the security interest, fill in items (Aa) to (Ac) below:

(Aa) Date of the security interest agreement: .....

(Ab) Duration: .....

(Ac) Information relating to the registration of the security interest (where registration is compulsory under the applicable law):  
.....  
.....

B. If the present request is a request for cancellation of the recordation of the security interest, fill in items (Ba) to (Bc) below:

(Ba) Date of the recordation of the security interest agreement: .....

(Bb) Recordation No. (if available): .....

(Bc) Information relating to the registration of the security interest (where registration is compulsory under the applicable law):  
.....  
.....

**Box No. IX DOCUMENTATION OF THE BASIS OF THE  SECURITY INTEREST AGREEMENT  
 TERMINATION OF THE SECURITY INTEREST AGREEMENT**

(a)  The security interest agreement/termination of the security interest agreement is a freely concluded agreement among the parties.

One of the following documents is enclosed:

- a copy of the agreement
- a copy, certified as being in conformity with the original, of the agreement
- an extract of the agreement consisting of those portions that show the rights and their extent
- an extract, certified as being a true extract, of the agreement consisting of those portions that show the rights and their extent

(b)  The security interest agreement/termination of the security interest agreement is not a freely concluded agreement among the parties (for example, an operation of law or a court decision)

A copy, or a copy certified as being in conformity with the original, of a document evidencing the security interest agreement/termination of the security interest agreement is enclosed (specify)

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**Box No. X INFORMATION RELATING TO GOVERNMENT INTEREST**

**Box No. XI STATEMENT THAT THE INFORMATION CONTAINED IN THE REQUEST IS TRUE AND CORRECT**

Empty space for the statement that the information contained in the request is true and correct.

**Box No. XII ENCLOSURE(S)**

- Power of attorney (Box No. III and/or VI)
- Documentation evidencing the  security interest agreement  termination of the security interest agreement (Box No. IX), and its translation, if necessary
- Consent to  recordation  cancellation of the recordation of a security interest by an applicant, owner, exclusive licensee, co-applicant, co-owner or co-exclusive licensee who is not party to that security interest and its translation, if necessary
- Separate copy(copies) of the request for each application and patent concerned, where the request relates to more than one application or patent
- Others (specify) .....  
.....  
.....

**Box No. XIII SIGNATURE OR SEAL; DATE**

*Next to each signature or seal, indicate the name of the person signing or sealing, the capacity in which the person signs or seals (if such capacity is not obvious) and the date of signature or of seal*

Large empty space for signatures, seals, and dates.