



# AMERICAN INTELLECTUAL PROPERTY LAW ASSOCIATION

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March 8, 1996

## MEMORANDUM

TO: PCT Seminar Participants

FROM: Martha Morales

Enclosed please find copies of the slides that Mr. Louis Maassel presented at the PCT Seminar on February 26-27, 1996.

MM/jac  
Enclosure

**PCT FORMS**

**(Annex A to the Administrative Instructions under the PCT)**

**PART V**

**Request and Demand Forms**

**(Applicable as from January 1996)**

# PCT

## REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum)

<b>Box No. I</b>	<b>TITLE OF INVENTION</b>
<b>Box No. II</b>	<b>APPLICANT</b>
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)</i>	<input type="checkbox"/> This person is also inventor. Telephone No. Facsimile No. Teleprinter No.
State (i.e. country) of nationality:	State (i.e. country) of residence:
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<b>Box No. III</b>	<b>FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)</i>	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>
State (i.e. country) of nationality:	State (i.e. country) of residence:
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV</b>	<b>AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)</i>	Telephone No. Facsimile No. Teleprinter No.
<input type="checkbox"/> Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

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

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.)*

This person is:

- applicant only
- applicant and inventor
- inventor only *(If this check-box is marked, do not fill in below.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

This person is applicant for the purposes of:

- all designated States
- all designated States except the United States of America
- the United States of America only
- the States indicated in the Supplemental Box

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.)*

This person is:

- applicant only
- applicant and inventor
- inventor only *(If this check-box is marked, do not fill in below.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

This person is applicant for the purposes of:

- all designated States
- all designated States except the United States of America
- the United States of America only
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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.)*

This person is:

- applicant only
- applicant and inventor
- inventor only *(If this check-box is marked, do not fill in below.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

This person is applicant for the purposes of:

- all designated States
- all designated States except the United States of America
- the United States of America only
- the States indicated in the Supplemental Box

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.)*

This person is:

- applicant only
- applicant and inventor
- inventor only *(If this check-box is marked, do not fill in below.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

This person is applicant for the purposes of:

- all designated States
- all designated States except the United States of America
- the United States of America only
- the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on another continuation sheet.

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes; at least one must be marked):

**Regional Patent**

- AP ARIPO Patent:** KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SZ Swaziland, UG Uganda, and any other State which is a Contracting State of the Harare Protocol and of the PCT
- EA Eurasian Patent:** AZ Azerbaijan, BY Belarus, KZ Kazakstan, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- EP European Patent:** AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, DE Germany, DK Denmark, ES Spain, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT
- OA OAPI Patent:** BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)

**National Patent (if other kind of protection or treatment desired, specify on dotted line):**

- |   |   |
|---|---|
| <input type="checkbox"/> AL Albania                               | <input type="checkbox"/> MD Republic of Moldova                       |
| <input type="checkbox"/> AM Armenia                               | <input type="checkbox"/> MG Madagascar                                |
| <input type="checkbox"/> AT Austria                               | <input type="checkbox"/> MK The former Yugoslav Republic of Macedonia |
| <input type="checkbox"/> AU Australia                             | <input type="checkbox"/> MN Mongolia                                  |
| <input type="checkbox"/> AZ Azerbaijan                            | <input type="checkbox"/> MW Malawi                                    |
| <input type="checkbox"/> BB Barbados                              | <input type="checkbox"/> MX Mexico                                    |
| <input type="checkbox"/> BG Bulgaria                              | <input type="checkbox"/> NO Norway                                    |
| <input type="checkbox"/> BR Brazil                                | <input type="checkbox"/> NZ New Zealand                               |
| <input type="checkbox"/> BY Belarus                               | <input type="checkbox"/> PL Poland                                    |
| <input type="checkbox"/> CA Canada                                | <input type="checkbox"/> PT Portugal                                  |
| <input type="checkbox"/> CH and LI Switzerland and Liechtenstein  | <input type="checkbox"/> RO Romania                                   |
| <input type="checkbox"/> CN China                                 | <input type="checkbox"/> RU Russian Federation                        |
| <input type="checkbox"/> CZ Czech Republic                        | <input type="checkbox"/> SD Sudan                                     |
| <input type="checkbox"/> DE Germany                               | <input type="checkbox"/> SE Sweden                                    |
| <input type="checkbox"/> DK Denmark                               | <input type="checkbox"/> SG Singapore                                 |
| <input type="checkbox"/> EE Estonia                               | <input type="checkbox"/> SI Slovenia                                  |
| <input type="checkbox"/> ES Spain                                 | <input type="checkbox"/> SK Slovakia                                  |
| <input type="checkbox"/> FI Finland                               | <input type="checkbox"/> TJ Tajikistan                                |
| <input type="checkbox"/> GB United Kingdom                        | <input type="checkbox"/> TM Turkmenistan                              |
| <input type="checkbox"/> GE Georgia                               | <input type="checkbox"/> TR Turkey                                    |
| <input type="checkbox"/> HU Hungary                               | <input type="checkbox"/> TT Trinidad and Tobago                       |
| <input type="checkbox"/> IS Iceland                               | <input type="checkbox"/> UA Ukraine                                   |
| <input type="checkbox"/> JP Japan                                 | <input type="checkbox"/> UG Uganda                                    |
| <input type="checkbox"/> KE Kenya                                 | <input type="checkbox"/> US United States of America                  |
| <input type="checkbox"/> KG Kyrgyzstan                            | <input type="checkbox"/> UZ Uzbekistan                                |
| <input type="checkbox"/> KP Democratic People's Republic of Korea | <input type="checkbox"/> VN Viet Nam                                  |
| <input type="checkbox"/> KR Republic of Korea                     |   |
| <input type="checkbox"/> KZ Kazakstan                             |   |
| <input type="checkbox"/> LK Sri Lanka                             |   |
| <input type="checkbox"/> LR Liberia                               |   |
| <input type="checkbox"/> LS Lesotho                               |   |
| <input type="checkbox"/> LT Lithuania                             |   |
| <input type="checkbox"/> LU Luxembourg                            |   |
| <input type="checkbox"/> LV Latvia                                |   |

Check-boxes reserved for designating States (for the purposes of a national patent) which have become party to the PCT after issuance of this sheet:

- .....
- .....
- .....
- .....

In addition to the designations made above, the applicant also makes under Rule 4.9(b) all designations which would be permitted under the PCT except the designation(s) of \_\_\_\_\_  
 The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation of a designation consists of the filing of a notice specifying that designation and the payment of the designation and confirmation fees. Confirmation must reach the receiving Office within the 15-month time limit.)

Use this box in the following cases:

1. If, in any of the Boxes, the space is insufficient to furnish all the information:

in particular:

(i) if more than two persons are involved as applicants and/or inventors and no "continuation sheet" is available:

in such case, write "Continuation of Box No. ..." [indicate the number of the Box] and furnish the information in the same manner as required according to the captions of the Box in which the space was insufficient;

in such case, write "Continuation of Box No. III" and indicate for each additional person the same type of information as required in Box No. III;

(ii) if, in Box No. II or in any of the sub-boxes of Box No. III, the indication "the States indicated in the Supplemental Box" is checked:

in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the applicant(s) involved and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is applicant;

(iii) if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America:

in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is inventor;

(iv) if, in addition to the agent(s) indicated in Box No. IV, there are further agents:

in such case, write "Continuation of Box No. IV" and indicate for each further agent the same type of information as required in Box No. IV;

(v) if, in Box No. V, the name of any State (or OAPI) is accompanied by the indication "patent of addition," or "certificate of addition," or if, in Box No. V, the name of the United States of America is accompanied by an indication "Continuation" or "Continuation-in-part":

in such case, write "Continuation of Box No. V" and the name of each State involved (or OAPI), and after the name of each such State (or OAPI), the number of the parent title or parent application and the date of grant of the parent title or filing of the parent application;

(vi) if there are more than three earlier applications whose priority is claimed:

in such case, write "Continuation of Box No. VI" and indicate for each additional earlier application the same type of information as required in Box No. VI.

2. If the applicant claims, in respect of any designated Office, the benefits of provisions of the national law concerning non-prejudicial disclosures or exceptions to lack of novelty:

in such case, write "Statement Concerning Non-Prejudicial Disclosures or Exceptions to Lack of Novelty" and furnish that statement below.

**Box No. VI PRIORITY CLAIM** Further priority claims are indicated in the Supplemental Box

The priority of the following earlier application(s) is hereby claimed:

Country (in which, or for which, the application was filed)	Filing Date (day/month/year)	Application No.	Office of filing (only for regional or international application)
item (1)			
item (2)			
item (3)			

Mark the following check-box if the certified copy of the earlier application is to be issued by the Office which for the purposes of the present international application is the receiving Office (a fee may be required):

The receiving Office is hereby requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) identified above as item(s) : \_\_\_\_\_

**Box No. VII INTERNATIONAL SEARCHING AUTHORITY**

**Choice of International Searching Authority (ISA)** (If two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used): **ISA /** \_\_\_\_\_

**Earlier search** Fill in where a search (international, international-type or other) by the International Searching Authority has already been carried out or requested and the Authority is now requested to base the international search, to the extent possible, on the results of that earlier search. Identify such search or request either by reference to the relevant application (or the translation thereof) or by reference to the search request:

Country (or regional Office): \_\_\_\_\_ Date (day/month/year): \_\_\_\_\_ Number: \_\_\_\_\_

**Box No. VIII CHECK LIST**

<p>This international application contains the following number of sheets:</p> <p>1. request : _____ sheets</p> <p>2. description : _____ sheets</p> <p>3. claims : _____ sheets</p> <p>4. abstract : _____ sheets</p> <p>5. drawings : _____ sheets</p> <p><b>Total</b> : _____ sheets</p>	<p>This international application is accompanied by the item(s) marked below:</p> <p>1. <input type="checkbox"/> separate signed power of attorney</p> <p>2. <input type="checkbox"/> copy of general power of attorney</p> <p>3. <input type="checkbox"/> statement explaining lack of signature</p> <p>4. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s): _____</p> <p>5. <input type="checkbox"/> fee calculation sheet</p> <p>6. <input type="checkbox"/> separate indications concerning deposited microorganisms</p> <p>7. <input type="checkbox"/> nucleotide and/or amino acid sequence listing (diskette)</p> <p>8. <input type="checkbox"/> other (specify): _____</p>
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Figure No. \_\_\_\_\_ of the drawings (if any) should accompany the abstract when it is published.

**Box No. IX SIGNATURE OF APPLICANT OR AGENT**

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

For receiving Office use only

1. Date of actual receipt of the purported international application:	2. Drawings: <input type="checkbox"/> received:  <input type="checkbox"/> not received:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	
4. Date of timely receipt of the required corrections under PCT Article 11(2):	
5. International Searching Authority specified by the applicant: <b>ISA /</b> _____	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid

For International Bureau use only

Date of receipt of the record copy by the International Bureau: \_\_\_\_\_

These Notes are intended to facilitate the filling in of the request form. For more detailed information, see the **PCT Applicant's Guide**, a publication of WIPO. The Notes are based on the requirements of the Patent Cooperation Treaty (PCT), the Regulations and the Administrative Instructions under the PCT. In case of any discrepancy between these Notes and those requirements, the latter are applicable.

In the request form and these Notes, "Article", "Rule" and "Section" refer to the provisions of the PCT, the PCT Regulations and the PCT Administrative Instructions, respectively.

Please use a typewriter; check-boxes may be marked by hand with black ink (Rule 11.9(a) and (b)).

## WHERE TO FILE THE INTERNATIONAL APPLICATION

The international application (request, description, claims, abstract and drawings, if any) must be filed with a competent receiving Office (Article 11(1)(i))—that is, subject to any applicable prescriptions concerning national security, at the choice of the applicant, either:

(i) the receiving Office of, or acting for, a PCT Contracting State of which the applicant or, if there are two or more applicants, at least one of them, is a resident or national (Rule 19.1(a)(i) or (ii)), or

(ii) the International Bureau of WIPO in Geneva, Switzerland, if the applicant or, if there are two or more applicants, at least one of the applicants is a resident or national of any PCT Contracting State (Rule 19.1(a)(iii)).

## APPLICANT'S OR AGENT'S FILE REFERENCE

A file reference may be indicated, if desired. It should not exceed 12 characters. Characters in excess of 12 may be disregarded. (Rule 11.6(f) and Section 109).

### BOX No. I

**Title of Invention** (Rules 4.3 and 5.1(a)): The title must be short (preferably two to seven words when in English or translated into English) and precise. It must be identical with the title heading the description.

### BOXES Nos. II AND III

**General:** At least one of the applicants named must be a resident or national of a PCT Contracting State for which the receiving Office acts (Articles 9 and 11(1)(i) and Rules 18 and 19). If the international application is filed with the International Bureau under Rule 19.1(a)(iii), at least one of the applicants must be a resident or national of any PCT Contracting State.

If the United States of America is designated, all of the inventors must be named as applicants (as well as inventors) for the purposes of that designation (see "Different Applicants for Different Designated States", below).

**Indication whether a Person is Applicant and/or Inventor** (Rules 4.5(a) and 4.6(a) and (b)):

**Check-box "This person is also inventor"** (Box No. II): Mark this check-box if the applicant named is also the inventor or one of the inventors; do not mark this check-box if the applicant is a legal entity.

**Check-box "applicant and inventor"** (Box No. III): Mark this check-box if the person named is both applicant and inventor; do not mark this check-box if the person is a legal entity.

**Check-box "applicant only"** (Box No. III): Mark this check-box if the person named is a legal entity or if the person named is not also inventor.

**Check-box "inventor only"** (Box No. III): Mark this check-box if the person named is inventor but not also applicant; do not mark this check-box if the person is a legal entity.

In Box No. III, one of the three check-boxes must always be marked for each person named.

A person must not be named more than once in Boxes Nos. II and III, even where that person is both applicant and inventor.

**Names and Addresses** (Rule 4.4): The family name (preferably in capital letters) must be indicated before the given name(s). Titles and academic degrees must be omitted. Names of legal entities must be indicated by their full official designations.

The address must be indicated in such a way that it allows prompt postal delivery; it must consist of all the relevant administrative units (up to and including the indication of the house number, if any), the postal code (if any), and the name of the country.

Only one address may be indicated per person. For the indication of a special "address for correspondence", see the notes to Box No. IV.

**Telephone, Facsimile and/or Teleprinter Numbers** should be indicated for the person named in Box No. II in order to allow rapid communication with the applicant. Any such number should include the applicable country and area codes.

**Nationality** (Rules 4.5(a) and (b) and 18.1): For each applicant, the nationality must be indicated by the name of the State (i.e., country) of which the person is a national. A legal entity constituted according to the national law of a State is considered a national of that State. The indication of the nationality is not required where a person is inventor only.

**Residence** (Rules 4.5(a) and (c) and 18.1): Each applicant's State (i.e., country) of residence must be indicated. If the State of residence is not indicated, it will be assumed to be the same as the State indicated in the address. Possession of a real and effective industrial or commercial establishment in a State is considered residence in that State. The indication of the residence is not required where a person is inventor only.

**Names of States** (Section 115): For the indication of names of States, the two-letter country codes appearing in WIPO Standard ST.3 and in the PCT Applicant's Guide, Annex K, may be used.

**Different Applicants for Different Designated States** (Rules 4.5(d), 18.3 and 19.2): It is possible to indicate different applicants for the purposes of different designated States. At least one of all the applicants named must be a national or resident of a PCT Contracting State for which the receiving Office acts, irrespective of the designated State(s) for the purposes of which that applicant is named. *Where the United*



designation fee in respect of the regional patent and as many designation fees as there are national patents or other titles of protection sought (Rule 15.1(ii) and Section 210).

**Extension of European Patent (EP) to Certain States:** If it is intended, at the time of entry into the European regional phase, to request the extension of the subsequently granted European patent to Albania, Latvia, Lithuania and/or Slovenia (and/or to any other PCT Contracting State for which, on the date of filing of the international application, an extension agreement with the European Patent Organisation is in force), Box No. V must contain *both* a designation of the State concerned for the purposes of a national patent and *also* a designation, for the purposes of obtaining a European patent, of at least one PCT Contracting State party to the European Patent Convention.

**OAPI Patent (OA):** The designation of States members of OAPI and party to the PCT can only be made for the purposes of an OAPI patent (no national protection is available); furthermore, it is not possible to designate only some of them.

**Choice of Certain Kinds of Protection or Treatment** (Rules 4.12 to 4.14 and Section 202): Where, in any country where it is possible, a national title other than a patent is desired, write after the name of that country on the dotted line the name of the title; that is, "petty patent" (available in Australia), "provisional patent" (available in Kazakstan, Kyrgyzstan, Turkmenistan, Uzbekistan), "utility model" (available in Albania, Armenia, Austria, Brazil, Bulgaria, China, the Czech Republic, Denmark, Estonia, Finland, Georgia, Germany, Hungary, Japan, Kazakstan, Kenya, Kyrgyzstan, Lesotho, Mexico, Poland, Portugal, the Republic of Korea, the Republic of Moldova, the Russian Federation, Slovakia, Spain, Tajikistan, Turkey, Ukraine, Uzbekistan, Viet Nam, OAPI), "utility certificate" (available in Trinidad and Tobago and Uganda) or "inventor's certificate" (available in the Democratic People's Republic of Korea). Where, in Austria, the Czech Republic, Denmark, Estonia, Finland, Germany or Slovakia (the only countries in which this possibility exists), in addition to a patent, a utility model is also desired, write after the name of that country "and utility model".

Where, in respect of any country where it is possible, it is desired that the international application be treated as an application for a certain title "of addition" or as an application for a "continuation" or a "continuation-in-part", write after the name of that country the appropriate words; that is, "patent of addition" (available in Australia, Austria, Georgia, Germany, Malawi, New Zealand, Slovenia, Spain, The former Yugoslav Republic of Macedonia), "certificate of addition" (available in Luxembourg, Madagascar, OAPI), "continuation" or "continuation-in-part" (both available in the United States of America). If any of these indications is used, also indicate in the "Supplemental Box" the State for which such treatment is desired, the number of the parent title or parent application, and the date of grant of the parent title or the date of filing of the parent application, as the case may be (see item 1(v) in that Box).

If, in Box No. V, the check-boxes for making designations are marked with consecutive Arabic numerals, those indications will be taken to express the applicant's *choice of the order of the designations*; if another form of marking is used, the order will be taken as that in which the marked check-boxes appear on the form. This order will only have any significance if the amount received for the designation fees is insufficient to cover all the designations and remains insufficient after the applicant has been invited to pay the balance due; in that case, the amount received will be applied in payment of the fees for the designations following the said order (Rule 16bis.1(c) and Section 321).

For the designation, for the purposes of a national patent, of a State which has become party to the PCT after the date appearing on the bottom of the second sheet of the request form, the name of the State, preferably preceded by the two-letter

country code, must be given together with an indication, where applicable, whether a special kind of protection or treatment is desired.

**Precautionary Designation of States Subject to Confirmation** (Rules 4.9(b) and (c) and 15.5): For the applicant's safeguard, the lower part of Box No. V contains a statement indicating the applicant's wish to make, in addition to the specific designations made by marking the check-boxes in the upper part of Box No. V (at least one such designation must be made), a precautionary designation of all other PCT Contracting States which are not specifically designated.

If the applicant does not wish to avail himself of this safeguard and does not want to make any such precautionary designations, the statement must be crossed out.

If the applicant wishes to expressly exclude a certain State from such precautionary designation so that the international application does not have any effect in that State, the name or two-letter country code of that State should be indicated in the space provided. In no other case is it necessary to make use of this possibility.

If, after filing the international application, the applicant notices that there are any omissions and/or mistakes among the specific designations made, it will be possible to rectify the situation by confirming the precautionary designations concerned. The confirmation of any precautionary designation is possible before the expiration of 15 months from the (earliest) priority date indicated in Box No. VI or, where no priority is claimed, the international filing date. To effect such confirmation, the applicant must file with the receiving Office a written notice specifying the name of each State the designation of which is confirmed (with, where applicable, an indication of the kind of treatment or protection desired) and pay to the receiving Office, for each such designation, a designation fee (even where eleven designation fees have already been paid) together with a confirmation fee corresponding to 50% of the designation fee.

The receiving Office will not send to the applicant any reminder or invitation to confirm precautionary designations.

If no precautionary designation is to be confirmed, no action is required by the applicant, and the precautionary designations will then be automatically regarded as withdrawn by the applicant at the expiration of 15 months from the priority date.

## BOX No. VI

**Priority Claim** (Rule 4.10): If the priority of an earlier application is claimed, the declaration containing the priority claim must be made in the request.

The request must indicate the *country* in which the earlier application from which priority is claimed was filed (or, where the earlier application is a regional or an international application, at least one country for which it was filed), the *date* on which it was filed and the *number* it was assigned. If the country and the date are not indicated, the priority claim will, for the purposes of the procedure under the Treaty, be considered not to have been made.

If the earlier application is a regional or an international application, the Office with which that application was filed must also be indicated.

If the application number of the earlier application is not indicated in the request but is furnished by the applicant to the receiving Office or to the International Bureau prior to the expiration of the 16th month from the priority date, it is considered by all designated States to have been furnished in time.

# PCT

## FEE CALCULATION SHEET

### Annex to the Request

For receiving Office use only

International application No.

Date stamp of the receiving Office

Applicant's or agent's  
file reference

Applicant

#### CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE . . . . .  T

2. SEARCH FEE . . . . .  S

International search to be carried out by \_\_\_\_\_  
(If two or more International Searching Authorities are competent in relation to the international application, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

##### Basic Fee

The international application contains \_\_\_\_\_ sheets.

first 30 sheets . . . . .  b<sub>1</sub>

\_\_\_\_\_ x \_\_\_\_\_ =  b<sub>2</sub>  
remaining sheets                      additional amount

Add amounts entered at b<sub>1</sub> and b<sub>2</sub> and enter total at B . . . . .  B

##### Designation Fees

The international application contains \_\_\_\_\_ designations.

\_\_\_\_\_ x \_\_\_\_\_ =  D  
number of designation fees                      amount of designation fee  
payable (maximum 11)

Add amounts entered at B and D and enter total at I . . . . .  I

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT . . . . .  P

5. TOTAL FEES PAYABLE

Add amounts entered at T, S, I and P, and enter total in the TOTAL box . . . . .  TOTAL

The designation fees are not paid at this time.

#### MODE OF PAYMENT

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> authorization to charge deposit account (see below) | <input type="checkbox"/> bank draft     | <input type="checkbox"/> coupons          |
| <input type="checkbox"/> cheque  | <input type="checkbox"/> cash           | <input type="checkbox"/> other (specify): |
| <input type="checkbox"/> postal money order                                  | <input type="checkbox"/> revenue stamps |   |

#### DEPOSIT ACCOUNT AUTHORIZATION (this mode of payment may not be available at all receiving Offices)

- The RO/ \_\_\_\_\_  is hereby authorized to charge the total fees indicated above to my deposit account.
- is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.
- is hereby authorized to charge the fee for preparation and transmittal of the priority document to the International Bureau of WIPO to my deposit account.

Deposit Account Number

Date (day/month/year)

Signature

The purpose of the fee calculation sheet is to help the applicant to identify the prescribed fees and to calculate the amounts to be paid. It is strongly recommended that the applicant complete the sheet by entering the appropriate amounts in the boxes provided and submit the fee calculation sheet at the time of filing of the international application. This will help the receiving Office to verify the calculations and to identify any error in them.

Information about the applicable fees payable can be obtained from the receiving Office. The amounts of the international and search fees may change due to currency fluctuations. Applicants are advised to check what are the latest applicable amounts. All fees, except in some cases the designation fee, must be paid within one month from the date of receipt of the international application. See below for further details concerning the possibility of later payment of the designation fee.

## CALCULATION OF PRESCRIBED FEES

**Box T: Transmittal Fee** for the benefit of the receiving Office (Rule 14.1): The amount and the due date of the transmittal fee, if any, are fixed by the receiving Office. Information about this fee is contained in Annex C of Volume I of the PCT Applicant's Guide.

**Box S: Search Fee** for the benefit of the International Searching Authority (ISA) (Rule 16.1): The amount of the search fee is fixed by the ISA. It must be paid within one month from the date of receipt of the international application by the receiving Office. Information about this fee is contained in Annex D of Volume I of the PCT Applicant's Guide.

Where two or more ISAs are competent, the applicant must indicate his choice in the space provided for this purpose and pay the amount of the international search fee fixed by the ISA chosen. Information on the competent ISA and whether the applicant has a choice between two or more ISAs is contained in Annex C of Volume I of the PCT Applicant's Guide.

**Box I: International Fee** for the benefit of the International Bureau (Rule 15): The international fee consists of a basic fee and as many designation fees as there are specific designations under Rule 4.9(a) in Box No. V (DESIGNATION OF STATES) of the request. The amounts of the basic fee and of the designation fee are as set out in Swiss Francs in the Schedule of Fees and the applicable amounts of those fees in other currencies are as published in the PCT Gazette (Rule 15.2). Information about those fees is also contained in Annex C of Volume I of the PCT Applicant's Guide.

**Reduction of the International Fee for Applicants from Certain States:** An applicant who is a natural person and who is a national of and resides in a State whose per capita national income is below 3,000 US dollars (according to the average per capita national income figures used by the United Nations for determining its scale of assessments for the contributions payable for the years 1995, 1996 and 1997) is entitled, in accordance with the Schedule of Fees, to a reduction of 75% of certain PCT fees including the international fee. If there are several applicants, each must satisfy the above-mentioned criteria. The reduction of the international fee (basic fee and designation fees) will be automatically available to any applicant (or applicants) who is (or are) so entitled on the basis of the indications of name, nationality and residence given in Boxes II and III of the request.

The fee reduction will be available even if one or more of the applicants are not from PCT Contracting States, provided that each of them is a national and resident of a State that meets the above-mentioned requirements and that at least one of the applicants is a national or resident of a PCT Contracting State and thus is entitled to file an international application.

Natural persons who are nationals of and reside in the following PCT Contracting States are eligible: Albania, Armenia, Azerbaijan, Belarus, Benin, Brazil, Bulgaria, Burkina Faso, Cameroon, Central African Republic, Chad, China, Congo, Côte d'Ivoire, Czech Republic, Democratic People's Republic of Korea, Estonia, Gabon, Georgia, Guinea, Hungary, Kazakhstan, Kenya, Kyrgyzstan, Latvia, Lesotho, Liberia, Lithuania, Madagascar, Malawi, Mali, Mauritania, Mexico, Mongolia, Niger, Poland, Republic of Moldova, Romania, Russian Federation, Senegal, Slovakia, Sri Lanka, Sudan, Swaziland, Tajikistan, The former Yugoslav Republic of Macedonia, Togo, Turkey, Turkmenistan, Uganda, Ukraine, Uzbekistan and Viet Nam. As far as other States are concerned, inquiries should be addressed to the International Bureau.

**Calculation of the International Fee (Basic Fee and Designation Fees) in Case of Fee Reduction:** Where the applicant is (or all applicants are) entitled to a reduction of the international fee, the total to be entered at box I is 25% of the sum of the amounts entered at boxes B and D (see below).

**Box B: Basic Fee.** The amount of the basic fee depends on the total number of sheets of the international application, which appears under "Total" in Box No. VIII (CHECK LIST) of the request. The basic fee must be paid within one month from the date of receipt of the international application by the receiving Office.

**Box D: Designation Fees.** The number of designation fees due corresponds to the number of check-boxes marked in Box No. V of the request.

The number of designation fees which are due is the same as the number of national patents and regional patents in respect of which specific designations under Rule 4.9(a) are made. Only one designation fee is due for the designation "AP", the designation "EA", the designation "EP" or the designation "OA", irrespective of the number of States for which an ARIPO patent, a Eurasian patent, a European patent or an OAPI patent, respectively, is sought.

Where any States are designated twice (once for the purposes of an ARIPO patent, a Eurasian patent or a European patent and once for the purposes of national protection), the applicant must pay one designation fee in respect of the ARIPO patent, the Eurasian patent or the European patent and a further designation fee in respect of each national patent or other title of protection sought (Rule 15.1(ii) and Section 210).

**Any designation, in excess of eleven designations for which the fee is due, is free of charge.** Therefore, the maximum amount to be indicated in box D is eleven times the amount of the designation fee. If, for example, 15 national patents and four regional patents (an ARIPO patent, a Eurasian patent, a European

The demand must be filed directly with the competent international preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA/ \_\_\_\_\_

# PCT

## CHAPTER II

### DEMAND

under Article 31 of the Patent Cooperation Treaty:  
 The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty.

For International Preliminary Examining Authority use only

Identification of IPEA		Date of receipt of DEMAND
<b>Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION</b>		Applicant's or agent's file reference
International application No.	International filing date (day/month/year)	(Earliest) Priority date (day/month/year)
Title of invention		
<b>Box No. II APPLICANT(S)</b>		
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.)		Telephone No.:
		Facsimile No.:
		Teleprinter No.:
State (i.e. country) of nationality:		State (i.e. country) of residence:
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.)		
State (i.e. country) of nationality:		State (i.e. country) of residence:
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.)		
State (i.e. country) of nationality:		State (i.e. country) of residence:
<input type="checkbox"/> Further applicants are indicated on a continuation sheet.		

## Continuation of Box No. II APPLICANT(S)

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

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.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

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.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

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.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

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.)*

State *(i.e. country)* of nationality:

State *(i.e. country)* of residence:

Further applicants are indicated on another continuation sheet.

**Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The following person is  agent  common representative  
 and  has been appointed earlier and represents the applicant(s) also for international preliminary examination.  
 is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.  
 is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

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.)*

Telephone No.:

Facsimile No.:

Teleprinter No.:

Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

**Box No. IV STATEMENT CONCERNING AMENDMENTS**

The applicant wishes the International Preliminary Examining Authority\*

- (i)  to start the international preliminary examination on the basis of the international application as originally filed.
- (ii)  to take into account the amendments under Article 34 of
  - the description (amendments attached).
  - the claims (amendments attached).
  - the drawings (amendments attached).
- (iii)  to take into account any amendments of the claims under Article 19 filed with the International Bureau (a copy is attached).
- (iv)  to disregard any amendments of the claims made under Article 19 and to consider them as reversed.
- (v)  to postpone the start of the international preliminary examination until the expiration of 20 months from the priority date unless that Authority receives a copy of any amendments made under Article 19 or a notice from the applicant that he does not wish to make such amendments (Rule 69.1(d)). *(This check-box may be marked only where the time limit under Article 19 has not yet expired.)*

\* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

**Box No. V ELECTION OF STATES**

The applicant hereby elects all eligible States *(that is, all States which have been designated and which are bound by Chapter II of the PCT)* except .....

.....

.....

*(If the applicant does not wish to elect certain eligible States, the name(s) or country code(s) of those States must be indicated above.)*

**Box No. VI CHECKLIST**

The demand is accompanied by the following documents for the purposes of international preliminary examination:

- |  |   |        |
|--|---|--------|
| 1. amendments under Article 34                     |   |        |
| description  | : | sheets |
| claims   | : | sheets |
| drawings   | : | sheets |
| 2. letter accompanying amendments under Article 34 | : | sheets |
| 3. copy of amendments under Article 19             | : | sheets |
| 4. copy of statement under Article 19              | : | sheets |
| 5. other ( <i>specify</i> ):                       | : | sheets |

For International Preliminary Examining Authority use only

received                      not received

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

The demand is also accompanied by the item(s) marked below:

- |  |   |
|--|---|
| 1. <input type="checkbox"/> separate signed power of attorney      | 4. <input type="checkbox"/> fee calculation sheet     |
| 2. <input type="checkbox"/> copy of general power of attorney      | 5. <input type="checkbox"/> other ( <i>specify</i> ): |
| 3. <input type="checkbox"/> statement explaining lack of signature |   |

**Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**

*Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).*

For International Preliminary Examining Authority use only

1. Date of actual receipt of DEMAND:

2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):

3.  The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.       The applicant has been informed accordingly.

4.  The date of receipt of the demand is WITHIN the period of 19 months from the priority date as extended by virtue of Rule 80.5.

5.  Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

For International Bureau use only

Demand received from IPEA on:

These Notes are intended to facilitate the filling in of the demand form and to give some information concerning international preliminary examination under Chapter II of the Patent Cooperation Treaty (PCT). For more detailed information, see the **PCT Applicant's Guide**, a publication of WIPO. The Notes are based on the requirements of the PCT, the Regulations and the Administrative Instructions under the PCT. In case of any discrepancy between these Notes and those requirements, the latter are applicable.

In the demand form and these Notes, "Article," "Rule" and "Section" refer to the provisions of the PCT, the PCT Regulations and the Administrative Instructions, respectively.

Please use a typewriter; check-boxes may be marked by hand with dark ink (Rules 11.9(a) and (b) and 11.14).

## IMPORTANT GENERAL INFORMATION

**Who May File a Demand?** (Article 31(2)(a) and Rule 54): A demand (for international preliminary examination) may only be filed by an applicant who is a national or resident of a PCT Contracting State which is bound by Chapter II of the PCT; furthermore, the international application must have been filed with a receiving Office of, or acting for, a State bound by Chapter II. Where there are two or more applicants (for the same or different elected States) at least one of them must qualify.

**Where Must the Demand Be Filed?** (Article 31(6)(a)): The demand must be filed with a competent International Preliminary Examining Authority (IPEA). The receiving Office with which the international application was filed will, upon request, give information about the competent IPEA (or see Annex C of Volume I of the PCT Applicant's Guide). If several IPEAs are competent, the applicant has the choice and the demand must be filed with (and the fees must be paid to) the IPEA chosen by the applicant. The IPEA chosen by the applicant may be identified, preferably by an indication of the name or two-letter code of the IPEA, at the top of the first sheet of the demand in the space provided for that purpose.

**When Must the Demand Be Filed?** (Article 39(1)): The demand must be filed before the expiration of *19 months from the priority date* in order to extend the time limit for entering the national phase of the PCT procedure from 20 to 30 months from the priority date. *Warning:* if the demand is filed later, the national phase will not be delayed in respect of the elected States and the applicant must enter the national phase before the expiration of the time limit applicable under Article 22 (which is usually 20 months from the priority date).

**In Which Language Must the Demand Be Filed?** (Rule 55.1): The demand must be filed in the language of the international application if that language is Chinese, English, French, German, Japanese or Russian; otherwise, the demand must be filed in English.

**In Which Language Must Amendments Be Filed?** (Rule 66.9): Amendments and letters relating thereto must be in the language of publication.

**What is the Language of Correspondence?** (Rule 92.2 and Section 104): Any letter from the applicant to the IPEA must be in the same language as the international application to which it relates. However, the IPEA may authorize the use of another language for letters which do not contain or relate to amendments of the international application. Any letter from the applicant to the International Bureau must be in English or French, at the choice of the applicant. However, if the language of the international application is English, the letter must be in English; if the language of the international application is French, the letter must be in French.

**Which Fees Must Be Paid and When?** (Rules 57 and 58): At the time the demand is submitted, the applicant must pay the preliminary examination fee and the handling fee. The Fee

Calculation Sheet should be used for that purpose. For details concerning the payment of the fees, see the Notes to that Sheet.

## BOX No. I

**Applicant's or Agent's File Reference:** A file reference may be indicated, if desired. It should not exceed 12 characters. Characters in excess of 12 may be disregarded (Section 109).

**Identification of the International Application** (Rule 53.6): The international application number must be indicated in Box No. I. Where the demand is filed at a time when the international application number has not yet been notified by the receiving Office, the name of that Office must be indicated instead of the international application number.

**International Filing Date and (Earliest) Priority Date** (Section 110): Dates must be indicated by the Arabic number of the day, the name of the month and the Arabic number of the year—in that order; after, below or above such indication, the date should be repeated in parentheses, using two-digit Arabic numerals for each of the number of the day, the number of the month and the last two numbers of the year, in that order, and separated by periods, slants or hyphens, e.g., "05 March 1992 (05.03.92)", "05 March 1992 (05/03/92)" or "05 March 1992 (05-03-92)". Where the international application claims the priority of several earlier applications, the filing date of the earliest application whose priority is claimed must be indicated as the priority date.

**Title of the Invention:** If a new title has been established by the International Searching Authority, that title must be indicated in Box No. I.

## BOX No. II

**Applicant(s)** (Rule 53.4): All the applicants for the elected States must be indicated in the demand; an applicant named in the request (Form PCT/RO/101) for a State which is not elected need not be named in the demand. It should be noted that the persons named as "inventor only" in the request need not be named in the demand.

Make in Box No. II of the demand the required indications as appearing in Boxes Nos. II and III of the request. The Notes to the request apply *mutatis mutandis*. If there are two or more applicants for the States elected in the demand, give the required indications for each of them; if there are more than three applicants, make the required indications on the "Continuation Sheet".

If different applicants are indicated in the request for different designated States, indicate in Box No. II of the demand only the applicants for the States elected in Box No. V (no indication of the States for which a person is applicant need be made, because those indications have been made in the request).



# PCT

## FEE CALCULATION SHEET

### Annex to the Demand for international preliminary examination

International application No. _____ <hr/> Applicant's or agent's file reference _____	For International Preliminary Examining Authority use only  Date stamp of the IPEA _____								
<b>Applicant</b> _____									
<b>Calculation of prescribed fees</b>  1. Preliminary examination fee ..... <span style="border: 1px solid black; padding: 2px 10px;">P</span>  2. Handling fee ( <i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i> ) ..... <span style="border: 1px solid black; padding: 2px 10px;">H</span>  3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box ..... <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">TOTAL</div>									
<b>Mode of Payment</b>  <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)</td> <td><input type="checkbox"/> cash</td> </tr> <tr> <td><input type="checkbox"/> cheque</td> <td><input type="checkbox"/> revenue stamps</td> </tr> <tr> <td><input type="checkbox"/> postal money order</td> <td><input type="checkbox"/> coupons</td> </tr> <tr> <td><input type="checkbox"/> bank draft</td> <td><input type="checkbox"/> other (<i>specify</i>): _____</td> </tr> </table>		<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input type="checkbox"/> cash	<input type="checkbox"/> cheque	<input type="checkbox"/> revenue stamps	<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons	<input type="checkbox"/> bank draft	<input type="checkbox"/> other ( <i>specify</i> ): _____
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input type="checkbox"/> cash								
<input type="checkbox"/> cheque	<input type="checkbox"/> revenue stamps								
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons								
<input type="checkbox"/> bank draft	<input type="checkbox"/> other ( <i>specify</i> ): _____								
<b>Deposit Account Authorization</b> ( <i>this mode of payment may not be available at all IPEAs</i> )  The IPEA/ _____ <input type="checkbox"/> is hereby authorized to charge the total fees indicated above to my deposit account.  <input type="checkbox"/> ( <i>this check-box may be marked only if the conditions for deposit accounts of the IPEA so permit</i> ) is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.									
_____ Deposit Account Number	_____ Date (day/month/year)	_____ Signature							

**NOTES TO THE FEE CALCULATION SHEET  
(ANNEX TO FORM PCT/IPEA/401)**

The purpose of the fee calculation sheet is to help the applicant to identify the prescribed fees and to calculate the amounts to be paid. It is strongly recommended that the applicant complete, by entering the appropriate amounts in the boxes provided, and submit the fee calculation sheet at the time of filing of the demand. This will help the International Preliminary Examining Authority (IPEA) to verify the calculations and to identify any error in them.

### **CALCULATION OF PRESCRIBED FEES**

Two fees must be paid for international preliminary examination:

- (i) the preliminary examination fee for the benefit of the IPEA (Rule 58.1);
- (ii) the handling fee for the benefit of the International Bureau (Rule 57).

Both fees must be paid to the IPEA upon filing the demand in a currency acceptable to that Authority.

Information about the amount of those fees or about equivalent amounts in other currencies can be obtained from the IPEA or the receiving Office. This information is also published in Annex E of Volume I of the PCT Applicant's Guide and from time to time in Section IV of the PCT Gazette.

**Box P:** The amount of the preliminary examination fee must be entered in Box P.

**Box H:** The amount of the handling fee must be entered in Box H.

**Reduction of the Handling Fee for Applicants from Certain States:** An applicant who is a natural person and who is a national of and resides in a State whose per capita national income is below 3,000 US dollars (according to the average per capita national income figures used by the United Nations for determining its scale of assessments for the contributions payable for the years 1995, 1996 and 1997) is entitled, in accordance with the Schedule of Fees, to a reduction of 75% of certain PCT fees including the handling fee. If there are several applicants, each must satisfy the above-mentioned criteria. The reduction of the handling fee will be automatically available to any applicant (or applicants) who is (or are) so entitled on the basis of the indications of name, nationality and residence given in Box II of the demand.

The fee reduction will be available even if one or more of the applicants are not from PCT Contracting States, provided that each of them is a national and resident of a State that meets the above-mentioned requirements and that at least one of the applicants is a national or resident of a PCT Contracting State and thus is entitled to file an international application.

Natural persons who are nationals of and reside in the following PCT Contracting States are eligible: Albania, Armenia, Azerbaijan, Belarus, Benin, Brazil, Bulgaria, Burkina Faso, Cameroon, Central African Republic, Chad, China, Congo, Côte d'Ivoire, Czech Republic, Democratic People's Republic of Korea, Estonia, Gabon, Georgia, Guinea, Hungary, Kazakstan, Kenya, Kyrgyzstan, Latvia, Lesotho, Liberia, Lithuania, Madagascar, Malawi, Mali, Mauritania, Mexico, Mongolia, Niger, Poland, Republic of Moldova, Romania, Russian Federation, Senegal, Slovakia, Sri Lanka, Sudan, Swaziland, Tajikistan, The former Yugoslav Republic of Macedonia, Togo, Turkey, Turkmenistan, Uganda, Ukraine, Uzbekistan and Viet Nam. As far as other States are concerned, inquiries should be addressed to the International Bureau.

**Calculation of the Handling Fee in Case of Fee Reduction:** Where the applicant is (or all applicants are) entitled to a reduction of the handling fee, the total to be entered at Box H is 25% of the handling fee.

**Total Box:** The total of the amounts inserted in Boxes P and H is the amount which must be paid to the IPEA.

### **MODE OF PAYMENT**

In order to help the IPEA identify the mode of payment of the prescribed fees, it is recommended to mark the applicable check-box(es).

### **AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT**

The applicant should check whether the IPEA allows the use of deposit accounts for payment of PCT fees. In addition, it is recommended that the applicant check what are the specific conditions applicable to the use of deposit accounts with the IPEA since not all IPEAs provide for the same services.

Finally, if the IPEA is not the same national Office or intergovernmental organization as that with which the international application was filed, the deposit account with the receiving Office cannot be charged for the purpose of paying the preliminary examination and handling fees due to the IPEA.

The IPEA will not charge fees to deposit accounts unless the deposit account authorization is signed and indicates the deposit account number.