

Fee: SG\$30.00
Date of Receipt:

Number of extra sheets
attached to this form:

SINGAPORE
PLANT VARIETIES PROTECTION ACT 2004
PLANT VARIETIES PROTECTION RULES 2004

FORM PVP 15

REQUEST FOR EXTENSION OF TIME

This form will take about 4-6 minutes to complete.

PART 1 Your reference

PART 2 PVP No.

PART 3 Particulars of person requesting the extension

Name

Address

If the person requesting the extension is not the grantee / applicant for the grant of protection, please indicate his interest / status in relation to the grant / application:

PART 4 Particulars of matter for which the extension is requested

PART 5 Reason for requiring the extension

PART 6 Is any person likely to be affected by the extension?

Yes

No

If the answer to the above is "Yes", does the person consent to the extension?

Yes

No

PART 7 Address for service

Name

Address

Telephone

Fax

Signature _____

Date Month Year

Name _____

(in block letters)

Official capacity of signatory

General Instructions

- a. *This form should preferably be typewritten to assist in processing.*
- b. *A separate form should be used for each application for grant.*
- c. *This form when completed should be filed with the prescribed fee.*
- d. *If there is not enough space to fill in any part of this form, please use separate sheets.*
- e. *Please note that the address for service must be an address in Singapore. Your attention is drawn to rule 9 of the Plant Varieties Protection Rules 2004.*