





	<p><b>Foreign Address</b></p> <p>Line 1 <input type="text"/></p> <p>Line 2 <input type="text"/></p> <p>Line 3 <input type="text"/></p>
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Nationality or Country of Incorporation*	<input type="text"/>
State of Incorporation <i>(mandatory for USA corporations)</i>	<input type="text"/>
Country of Residency <i>(mandatory for individuals)</i>	<input type="text"/>
Sole Proprietor or Partners' Name <i>(if sole proprietorship or partnership)</i>	<input type="text"/>

**PART 7 Details of Licensee\***

*Note: If there is insufficient space, please use the continuation sheet in CS 1.*

UEN/ Company Code <i>(if applicable)</i>	<input type="text"/>
Name	<input type="text"/>

Address	<p><b>Singapore Address</b></p> <p><input type="checkbox"/> This Singapore address is to be used as the address for service for the purposes of this form. <i>(Note: If this is crossed, it is not necessary to fill up the address for service in Singapore in part 11.)</i></p> <p>Block/ House No. <input type="text"/></p> <p>Street Name <input type="text"/></p> <p>Level - Unit <input type="text"/> - <input type="text"/></p> <p>Building Name <input type="text"/></p> <p>Postal Code <input type="text"/></p>
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	<p>Foreign Address</p> <p>Line 1 <input type="text"/></p> <p>Line 2 <input type="text"/></p> <p>Line 3 <input type="text"/></p>
<p>Nationality or Country of Incorporation*</p> <p>State of Incorporation <i>(mandatory for USA corporations)</i></p> <p>Country of Residency <i>(mandatory for individuals)</i></p> <p>Sole Proprietor or Partners' Name <i>(if sole proprietorship or partnership)</i></p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p>
<p><b>PART 8 Licence Type*</b></p>	
<p><i>Note: Exclusive licence means a licence conferring on the licensee, to the exclusion of all other persons (including the licensor), any right in respect of the intellectual property.</i></p>	
<p>Licence Type* <i>(Note: Cross one box only)</i></p>	<p><input type="checkbox"/> Exclusive Licence</p> <p><input type="checkbox"/> Non-exclusive Licence</p>
<p><b>PART 9 Licence Date*</b></p>	
<p>Start Date <i>(DD/MM/YYYY)</i></p> <p>End Date <i>(if any)</i> <i>(DD/MM/YYYY)</i></p>	<p><input type="text"/></p> <p><input type="text"/></p>
<p><b>PART 10 Details of Licence to be Registered, Amended or Terminated*</b></p>	
<p>Details of Licence to be Registered, Amended or Terminated* <i>(e.g. details of the trade mark no., class no. and goods/services in the registration of a Trade Mark licence)</i></p>	<p><input type="text"/></p>



**PART 13 Signature for Authorisation to Register/ Amend/ Terminate a Licence**

*Note: Fill in this part only if first checkbox of Part 12 of this form is selected. Provide below the signature for the authorisation to register/ amend/ terminate a licence.*

Name	<input type="text"/>																				
Signature of Licensor <i>(or his representative if so authorised)</i>	<input type="text"/>																				
Official Capacity of Signatory	<input type="text"/>																				
Date <i>(DD/MM/YYYY)</i>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				

**PART 14 Declaration\***

Declaration <i>(** delete where necessary)</i>	<p><b><u>By Person Filing the Form</u></b></p> <p>I, the undersigned, do hereby declare that the information furnished above on behalf of the licensor/ licensee** is true to the best of my knowledge.</p> <p><b><u>By Agent</u></b></p> <p>I, the undersigned, do hereby declare that :</p> <ul style="list-style-type: none"><li>i. I have been duly authorised to act as an agent on behalf of the licensor/licensee**</li><li>ii. The information furnished above on behalf of the licensor/licensee** is true to the best of the person(s)' knowledge.</li></ul>																				
Name	<input type="text"/>																				
Signature	<input type="text"/>																				
Date <i>(DD/MM/YYYY)</i>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
No. of Extra Sheets Attached to this Form	<input type="text"/> sheet(s)																				



GST	GST INFORMATION
<b>Details of Requestor</b>	
<p><u>Note:</u> If the requestor(s) is/are the licensor or licensee (as in Part 6 and 7 above), this part is to be left empty.</p>	
<p><b>Name of Requestor</b> <i>(If the requestor is not the licensee or licensor (as in Part 6 or 7 of the form), please insert the name of the requestor)</i></p>	<input data-bbox="550 443 1362 555" type="text"/>
<p><b>Local/Foreign Address</b> <i>(to include block no, unit-level no., street name and postal code)</i></p>	<input data-bbox="550 663 1362 775" type="text"/>
<p><b>Country of Incorporation</b> <i>(mandatory for corporations)</i></p>	<input data-bbox="550 837 1128 900" type="text"/>
<p><b>State of Incorporation</b> <i>(mandatory for USA corporations)</i></p>	<input data-bbox="550 943 1362 1055" type="text"/>
<p><b>Country of Residency</b> <i>(mandatory for individuals)</i></p>	<input data-bbox="550 1088 1128 1151" type="text"/>

<b>Tax Invoice*</b>	
<p><u>Note:</u> Tax invoice will be issued to the entity/individual as indicated. Goods and Services Tax (GST)-registered businesses may claim input tax with Inland Revenue Authority of Singapore (IRAS), subject to meeting the requirements under the GST Act.</p>	
<p><b>Name (Tax invoice to be issued to)</b></p>	<p><i>The name of the requestor (as in Part 6 or 7 or "Name of Requestor" of this form) should be inserted in this field.</i></p> <input data-bbox="550 1509 1362 1621" type="text"/>