


**SINGAPORE PATENTS ACT (CHAPTER 221)
PATENTS RULES**

PATENTS FORM 11  *2006*	Request for Search and Examination Report
<p><u>Pre-requisites:</u></p> <p>a. If you are making a request under the ASEAN Patent Examination Co-operation (ASPEC) programme or a request under the Patent Prosecution Highway (PPH), please refer to the ASPEC or PPH Notice and Procedures available on IPOS's website at http://www.ipos.gov.sg for the documents to be filed together with this form.</p> <p><u>Estimated Time:</u> This form may take approximately 3 - 5 minutes to complete.</p> <p><u>General:</u></p> <p>a. * denotes mandatory fields.</p> <p>b. Attention is drawn to sections 104 and 105 of the Patents Act, rules 90 and 105 of the Patents Rules, and the Patents (Patent Agents) Rules 2001.</p>	
PART 1 Reference	
Applicant/ Agent Reference	<input style="width: 100%; height: 20px;" type="text"/>
PART 2 Application No.*	
Application No.*	<input style="width: 100%; height: 20px;" type="text"/>
PART 3 Name of Applicant*	
<p><u>Note:</u> If there is insufficient space, please use the continuation sheet CS 4.</p>	
UEN/ Company Code <i>(if applicable)</i>	<input style="width: 100%; height: 20px;" type="text"/>
Name	<input style="width: 100%; height: 40px;" type="text"/>
Sole Proprietor or Partners' Name <i>(if sole proprietorship or partnership)</i>	<input style="width: 100%; height: 40px;" type="text"/>
PART 4 International Search Report (ISR)/ International Preliminary Report on Patentability (IPRP)	
ISR / IPRP <i>(Note: Please cross if applicable)</i>	<input type="checkbox"/> International Search Report (ISR) / International Preliminary Report on Patentability (IPRP) is established by IPOS
PART 5 Additional Information Required for Patents Form 11 filed on or after 01 Apr 2017	
Number of Claims	<input style="width: 100%; height: 20px;" type="text"/> claim(s)
PART 6 Grace Period	
Grace Period <i>(Note: Please cross if applicable)</i>	<input type="checkbox"/> There has been a disclosure of matter of the invention 12 months prior to the date of filing this application

PART 7 ASEAN Patent Examination Co-operation (ASPEC) / Patent Prosecution Highway (PPH)																																																																					
ASPEC / PPH <i>(Note: Please cross if applicable)</i>	<input type="checkbox"/> ASPEC / PPH requested and required documents are attached																																																																				
PART 8 Contact Details*																																																																					
<i>Note:</i> a. Where an agent with UEN is appointed, the fields for "Agent UEN/ Company Code", "Agent Name" and "Address for Service in Singapore" should be completed. Where an individual or an agent without UEN is appointed, the sub-field "Representative or C/O Name" and "Address for Service in Singapore" should be completed instead. b. The official correspondence will be sent to the address for service in Singapore as indicated in this box, and must be the same as the one on our record. c. Please file Form CM1 if you are a different agent or Form CM2 if you have changed your address for service in Singapore.																																																																					
Agent UEN/ Company Code Agent Name	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td colspan="12" style="height: 25px;"></td> </tr> </table>																																																																				
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Contact Person <i>(if applicable)</i> Direct Telephone No. <i>(if applicable)</i> Email Address <i>(if applicable)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="height: 25px;"></td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td colspan="12" style="height: 25px;"></td> </tr> </table>																																																																				
PART 9 Declaration*																																																																					
Declaration	<p><u>By Person Filing the Form</u></p> <p>I, the undersigned, do hereby declare that the information furnished above is true to the best of my knowledge. I understand that I may be liable for criminal prosecution for providing any false information in this application.</p> <p><u>By Agent</u></p>																																																																				

	<p>I, the undersigned, do hereby declare that:</p> <ul style="list-style-type: none"> i. I have been duly authorised to act as an agent on behalf of the person(s) filing this form. ii. The information furnished above on behalf of the person(s) filing this form is true to the best of the person(s)' knowledge. I understand that I may be liable for criminal prosecution for providing any false information in this application.
<p>Name</p> <p>Signature</p> <p>Date (DD/MM/YYYY)</p>	<div data-bbox="552 465 1366 528" style="border: 1px solid black; height: 28px; width: 100%;"></div> <div data-bbox="552 568 991 669" style="border: 1px solid black; height: 45px; width: 100%;"></div> <div data-bbox="552 698 935 761" style="border: 1px solid black; display: flex; justify-content: space-between;"> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> <div style="width: 10%; border: 1px solid black; height: 28px;"></div> </div>
<p>No. of Extra Sheets Attached to this Form</p>	<div data-bbox="552 792 751 855" style="border: 1px solid black; width: 125px; height: 28px;"></div> <p style="margin-left: 150px;">sheet(s)</p>

GST	GST INFORMATION
Tax Invoice*	
<p><i>Note:</i> 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>Name (Tax invoice to be issued to)</p>	<p>The name of the Applicant (as in PART 3 of this form) is to be indicated in this field.</p> <div data-bbox="544 566 1358 680" style="border: 1px solid black; height: 50px; margin-top: 10px;"></div>