



AFRICAN REGIONAL INTELLECTUAL PROPERTY ORGANIZATION (ARIPO)

<p>ARIPO Form No. 41 ARIPO PROTOCOL ON PATENTS AND INDUSTRIAL DESIGNS</p> <p>APPLICATION TO REGISTER ASSIGNMENT, TRANSMISSION OR OTHER FORM OF TRANSFER PERTAINING TO PATENT OR INDUSTRIAL DESIGN, GRANTED, REGISTERED OR APPLIED FOR UNDER PROTOCOL (Rule 22(5); Instruction 73)</p> <p>To*: Director General ARIPO Office P.O. Box 4228 HARARE Zimbabwe</p>	<p align="center">For Official Use</p> <p>Received on:</p> <hr/> <p>Applicant's or Representative's File Reference:</p>								
<p>I. IN THE MATTER OF:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Application for Grant of Patent No.:</td> <td>Filing date:</td> </tr> <tr> <td>Patent No.:</td> <td>Date of grant:</td> </tr> <tr> <td>Application for Registration of Industrial Design, No.:</td> <td>Filing date:</td> </tr> <tr> <td>Registration of Industrial Design No.:</td> <td>Registration date:</td> </tr> </table>		Application for Grant of Patent No.:	Filing date:	Patent No.:	Date of grant:	Application for Registration of Industrial Design, No.:	Filing date:	Registration of Industrial Design No.:	Registration date:
Application for Grant of Patent No.:	Filing date:								
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Application for Registration of Industrial Design, No.:	Filing date:								
Registration of Industrial Design No.:	Registration date:								
<p>II. PRESENT APPLICANT(S)/OWNERS(S) ON RECORD Name:</p>									
<p>Address:</p>									
<p>III. APPLICATION The new applicant(s)/owner(s), below-identified, hereby applies(y), pursuant to Instruction 73, to the ARIPO Office to register with respect to the following designated contracting States whose national laws do not provide for such registration, the assignment/transmission/ (other form of transfer)* pertaining to the above-identified matter:</p>									
<p>IV. NEW APPLICANT(S)/OWNER(S) Name:</p>									
<p>Address:</p>									
<p>Nationality:</p>									
<p>Country of residence or principal place of business:</p>									
<p>Telephone Number</p>	<p>Telegraphic Address</p>	<p>Telex Number</p>							

* Delete whichever term does not apply and, if neither assignment nor transmission applies, indicate exact form of transfer concerned.

ARIPO Form No. 41 (cont'd)

V.	REPRESENTATIVE OF NEW APPLICANT(S)/OWNER(S) (if any)* The following representative has been appointed by the new applicant(s)/owner(s) in the power of attorney on ARIPO Form No. 4 accompanying this Form _____ to be filled within two months from the filing of this Form Name:	
Address:		
Telephone Number:	Telegraphic Address	Telex Number
VI.	ADDITIONAL INFORMATION The following items accompany this Form**: the original or a certified copy of the assignment, signed by or/on behalf of the contracting parties other documents evidencing the change of ownership (specify) other (specify)	
VII.	SIGNATURE(S) (Date)
	(New Applicant(s)/Owner(s)/Representative for New Applicant(s)/Owner(s)*** (in case of assignment also) (Date)
	(Present Applicant(s)/Owner(s)/Representative for Present Applicant(s)/Owner(s)***	

* Fill in this item only if the new applicant(s)/owner(s) has(ve) appointed a new representative; otherwise, it shall be presumed that the representative of the previous applicant(s)/owner(s) continues to represent the new one(s).

** See Instruction 73(2).

*** Type name(s) under signature(s) and delete whichever does not apply.