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| **FORM 1**  THE PATENTS ACT 1970 (39 of 1970) and THE PATENTS RULES, 2003 **APPLICATION FOR GRANT OF**  **PATENT**  (See section 7, 54 and 135 and sub-rule (1) of rule 20) | | | | | | | | (FOR OFFICE USE ONLY) | | | | | | | | | | |
|  | | | | | | | | Application No. | | |  | | | | | | | |
|  | | | | | | | | Filing date: | | |  | | | | | | | |
|  | | | | | | | | Amount of Fee  paid: | | |  | | | | | | | |
|  | | | | | | | | CBR No: | | |  | | | | | | | |
|  | | | | | | | | Signature: | | |  | | | | | | | |
| **1. APPLICANT’S REFERENCE /**  **IDENTIFICATION NO. (AS ALLOTTED BY OFFICE)** | | | | | | | | 3957 | | | | | | | | | | |
| **2. TYPE OF APPLICATION [Please tick (**ü **) at the appropriate category]** | | | | | | | | | | | | | | | | | | |
| Ordinary ( Ordinary ) | | | Convention ( ) | | | | | | PCT-NP ( ) | | | | | | PPH ( ) | | | |
| Divisional( ) | | Patent of  Addition ( ) | | Divisio | | nal( )( ) |  | Patent of  Addition ( ) | | | | | Divisional( ) | | | | Patent of  Addition ( ) |  |
| **3A. APPLICANT(S)** | | | | | | | | | | | | | | | | | | |
| Name in | Gender | | Nationality | | | | Country of | | | Age |  |  |  | Address of the Applicant | | | | |
| Full | (optional, | | Residence | | | (optional, | | | |
|  | for |  |  | | | for natural | | | |
|  | individuals) | |  | | | persons) | | | |
| hif | - Male | | bsf | | | | ksf | | | 8 years   * Prefer not to disclose | | | | House No. | | |  | |
| - Female | | Street | | |  | |
| - Others | | City | | |  | |
| - Prefer not | | State | | |  | |
| to disclose | | Country | | |  | |
| others | | Pin code | | |  | |
|  | | Email (OTP | | |  | |
|  | | verification | | |
|  | | mandatory | | |
|  | | -will be | |  |
|  | | redacted) | | |
|  | | Contact | |  |  | |
|  | | number | |  |
|  | | (OTP | |  |
|  | | verification | | |
|  | | mandatory | | |
|  | | -will be | |  |
|  | | redacted) | | |
| **3B. CATEGORY OF APPLICANT [Please tick (**ü **) at the appropriate category]** | | | | | | | | | | | | | | | | | | |
| Natural Person ( ) | | | Other than Natural Person ( ) | | | | | | | | | | | | | Educational institution () | | |
|  | | | Small Entity ( | | | ) |  |  | Startup ( ) | | | Others ( ) | | | |  | | |
| **4. INVENTOR(S) [Please tick (**ü **) at the appropriate category]** | | | | | | | | | | | | | | | | | | |
| Are all the inventor(s) same as the  applicant(s) named above? | | | | | Yes ( ) | | | | | | No ( ) | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **If “No”, furnish the details of the inventor(s)** | | | | | | | | | | | | |
| Name in | | Gender | Nationality | | Age (optional, | |  | Country of | Address of the Inventor | | | |
| Full | | (optional, | for natural | |  | Residence |
|  | | for natural | persons) | |  |  |
|  | | persons) |  | |  |  |
| wshef | | others  Male   * Female * Others | others | | 8 years   * Prefer not to disclose | | | ksjdzf | House No. | |  | |
| Street | |  | |
| City | |  | |
| - Prefer not | State | |  | |
| to disclose | Country | |  | |
|  | Pin code | |  | |
| **5. TITLE OF THE INVENTION** | | | | | | | | | | | | |
| skdhfksd | | | | | | | | | | | | |
| **6. AUTHORISED REGISTERED PATENT AGENT(S)** | | | | | | | | IN/PA No. | | 8927 | | |
| Name | | sjbdf | | |
| Mobile No. (OTP verification mandatory-will be  redacted) | | 298357 | | |
| **7. ADDRESS FOR SERVICE OF APPLICANT IN INDIA** | | | | | | | | Name | | skjdbjf | | |
| Postal Address | | fskjd | | |
| Telephone No. | | 238947 | | |
| Mobile No. (OTP verification mandatory-  will be redacted) | | 298374 | | |
| Fax No. | | sj | | |
| E-mail ID (OTP verification mandatory-  will be redacted) | | iosf@rwi | | |
| **8. IN CASE OF APPLICATION CLAIMING PRIORITY OF APPLICATION FILED IN CONVENTION**  **COUNTRY, PARTICULARS OF CONVENTION APPLICATION** | | | | | | | | | | | | |
| Country | Application Number | | | Filing date | | Name of the applicant | | | Title of the invention | | | IPC (as classified in the convention country) |
| iaufsdh | 238794 | | | 2025-07-09 | | sdfcgi | | | iusfh | | | skdfb |
| **9. IN CASE OF PCT NATIONAL PHASE APPLICATION, PARTICULARS OF INTERNATIONAL**  **APPLICATION FILED UNDER PATENT CO-OPERATION TREATY (PCT)** | | | | | | | | | | | | |
| International application number | | | | | | | International filing date | | | | | |
| 32947 | | | | | | | 2025-07-22 | | | | | |
| **10. IN CASE OF DIVISIONAL APPLICATION FILED UNDER SECTION 16, PARTICULARS OF**  **ORIGINAL (FIRST) APPLICATION** | | | | | | | | | | | | |
| Original (first) application No. | | | | | | | Date of filing of original (first) application | | | | | |
| 247093 | | | | | | | 2025-07-24 | | | | | |
| **11. IN CASE OF PATENT OF ADDITION FILED UNDER SECTION 54, PARTICULARS OF MAIN APPLICATION OR PATENT** | | | | | | | | | | | | |
| Main application/patent No. 234798 | | | | | | | Date of filing of main application: 2025-08-01 | | | | | |
| **12. DECLARATIONS** | | | | | | | | | | | | |

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| --- | --- | --- | --- |
| 1. **Declaration by the inventor(s)**   **(In case the applicant is an assignee:** the inventor(s) may sign herein below or the applicant may upload the assignment or enclose the assignment with this application for patent or send the assignment by post/electronictransmission duly authenticated within the prescribed period).  I/We, the above named inventor(s) is/are the true & first inventor(s) for this Invention and declare that the applicant(s) herein is/are my/our assignee or legal representative.   * 1. Date   2. Signature(s)   3. Name(s) | | | |
| 1. **Declaration by the applicant(s) in the convention country**   **(In case the applicant in India is different than the applicant in the convention country:** the applicant in the convention country may sign herein below or applicant in India may upload the assignment from the applicant in the convention country or enclose the said assignment with this application for patent or send the assignment by post/electronic transmission duly authenticated within the prescribed period)  I/We, the applicant(s) in the convention country declare that the applicant(s) herein is/are my/our assignee or legal representative.   * 1. Date   2. Signature(s)   3. Name(s) of the signatory | | | |
| 1. **Declaration by the applicant(s)**   I/We the applicant(s) hereby declare(s) that: -   * + I am/We are in possession of the above-mentioned invention.   ÿThe provisional/complete specification relating to the invention is filed with this application.  ÿThe invention as disclosed in the specification uses the biological material from India and the necessary permission from the competent authority shall be submitted by me/us before the grant of patent to me/us.  ÿThere is no lawful ground of objection(s) to the grant of the Patent to me/us.  ÿI am/we are the true & first inventor(s).   * + I am/we are the assignee or legal representative of true & first inventor(s).   ÿThe application or each of the applications, particulars of which are given in Paragraph-8, was the first application in convention country/countries in respect of my/our invention(s).  ÿI/We claim the priority from the above mentioned application(s) filed in convention country/countries and state that no application for protection in respect of the invention had been made in a convention country before that date by me/us or by any person from which I/We derive the title.  ÿMy/our application in India is based on international application under Patent Cooperation Treaty (PCT) as mentioned in Paragraph-9.  ÿThe application is divided out of my /our application particulars of which is given in Paragraph-10 and pray that this application may be treated as deemed to have been filed on DD/MM/YYYY under section 16 of the Act.  ÿThe said invention is an improvement in or modification of the invention particulars of which are given in Paragraph-11. | | | |
| **13. FOLLOWING ARE THE ATTACHMENTS WITH THE APPLICATION**  (a) Form 2 | | | |
| Item | Details | Fee | Remarks |
| Complete/ provisional  specification)# | No. of pages: |  | 32 |
| No. of Claim(s) | No. of claims and No. of  pages |  | 32 |
| Abstract | No. of pages |  | 23 |
| No. of Drawing(s) | No. of drawings and No. of  pages |  | 23 |

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| # In case of a complete specification, if the applicant desires to adopt the drawings filed with his provisional specification as the drawings or part of the drawings for the complete specification under rule 13(4), the number of  such pages filed with the provisional specification are required to be mentioned here. |
| 1. Complete specification (in conformation with the international application)/as amended before the International Preliminary Examination Authority (IPEA), as applicable (2 copies). 2. Sequence listing in electronic form 3. Drawings (in conformation with the international application)/as amended before the International Preliminary Examination Authority (IPEA), as applicable (2 copies). 4. Priority document(s) or a request to retrieve the priority document(s) from DAS (Digital Access Service) if the applicant had already requested the office of first filing to make the priority document(s) available to DAS. 5. Translation of priority document/Specification/International Search Report/International Preliminary Report on Patentability. 6. Statement and Undertaking on Form 3 7. Declaration of Inventorship on Form 5 8. Power of Authority (j)…………………………………………………………………………………………………..   Total fee ₹2369 in Cash/ Banker's Cheque /Bank Draft bearing No. 932874 Date: 2025-08-01 on hbsifh Bank.  I/We hereby declare that to the best of my/our knowledge, information and belief the fact and matters slatedherein are correct and I/We request that a patent may be granted to me/us for the said invention.  Dated this2025-07-23……day of………………….20…………………… Signature:  Name:jisdhfi  To,  The Controller of Patents  The Patent Office, at………………..  Note: -   * + Repeat boxes in case of more than one entry.   + To be signed by the applicant(s) or by authorized registered patent agent otherwise where mentioned.   + Tick (ü)/cross (x) whichever is applicable/not applicable in declaration in paragraph-12.   + Name of the inventor and applicant should be given in full, family name in the beginning.   + Strike out the portion which is/are not applicable.   + For fee: See First Schedule. |