NOAA Patent Licensing Application

Please type and include responses to all questions as required by 37 C.F.R. 404.8.

Company/Applicant Information:

Company Name:			
Mailing Address:			
City/State:			Zip Code:
Phone:	Fax:	E-mail:	
DUNS#:	Tax Identification (TIN)#:		
Place of Incorporation:			

Point of Contact Information:

Contact Name:			
Mailing Address:			
City/State:			Zip Code:
Phone:	Fax:	Email:	

How did you learn of the availability of the Invention? _____

Title of the NOAA patent or patent application: _____

Patent or patent application number and NOAA Docket Number and issue date (if known):

_____

Type of license sought (exclusive or non-exclusive): _____ Exclusive depending on price____

Field(s) of Use in which the applicant intends to practice the Invention: _____

Country (ies) in which the applicant intends to manufacture any products embodying the Invention: _____

Country (ies) in which the applicant intends to use and/or sell the Invention: _____

List all licenses previously granted to the applicant under federally-owned Inventions: _____

The following information will be treated as Proprietary Information if so marked.

Please attach responses to items 9 and 10 as well as any additional information that you believe will support the grant of the requested license.

A description of your current business, including products or services successfully commercialized, annual sales, number of employees, whether or not applicant is a small business as defined in Public Law 85-536 (15 U.S.C. 632) and other relevant information.

A detailed description of your plan for development and/or marketing of the Invention, including:

a) How long it will take to bring the Invention to a point of practical application and thence to the marketplace. Include an estimated date of the first commercial sale.

b) The amount and timing of anticipated capital investment and other resources required.

c) A description of applicant's capability and intent to fulfill the development and/or marketing plan. This should include a description of the manufacturing, marketing, financial and technical resources available to applicant and how they will be employed to carry out the plan as well as pro-forma financial projections indicating product price and annual sales volume.

d) Describe the nature and status any third party relationships crucial to commercialization including, but not limited to other licenses required, sublicenses of the licensed NOAA Invention, financing, research, marketing, distribution and manufacturing.

Signature: _____ Date: _____

Print Name: _____

Title: _____

Mailing address for application(s):

National Oceanic and Atmospheric Administration
Technology Partnerships Office
Technology Transfer Program Manager
1335 East West Highway, Room 106 (R/LCX1)
Silver Spring, MD 20910
Phone: (301) 713-3565
Fax: (301) 713-4100