

United States Department of Agriculture  
**PATENT LICENSE APPLICATION  
FOR GOVERNMENT INVENTIONS**

|                                                                                                                                                                         |                                                                                                        |                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| <b>United States Department of Agriculture<br/>PATENT LICENSE APPLICATION<br/>FOR GOVERNMENT INVENTIONS</b>                                                             |                                                                                                        | 1. AGENCY PATENT CASE NO.<br>(Optional)                                                           |
|                                                                                                                                                                         |                                                                                                        | 2. U.S. PATENT NO.                                                                                |
|                                                                                                                                                                         |                                                                                                        | 3. DATE OF PATENT                                                                                 |
| 6. TITLE OF PATENT/PATENT APPLICATION                                                                                                                                   |                                                                                                        | 4. U.S. PATENT APPLICATION<br>SERIAL NO.                                                          |
| 7. SOURCE OF INFORMATION CONCERNING AVAILABILITY OF THIS INVENTION                                                                                                      |                                                                                                        | 5. TYPE OF LICENSE<br><input type="checkbox"/> Exclusive<br><input type="checkbox"/> Nonexclusive |
| 8. NAME AND ADDRESS OF APPLICANT                                                                                                                                        | 9. NAME AND ADDRESS OF REPRESENTATIVE TO WHOM<br>CORRESPONDENCE SHOULD BE ADDRESSED                    |                                                                                                   |
| 10. STATE OF INCORPORATION (if corporation) or CITIZENSHIP (if an individual)                                                                                           | 11. TELEPHONE, FAX, AND EMAIL                                                                          |                                                                                                   |
| 12. NATURE AND DESCRIPTION OF APPLICANT'S BUSINESS – Identify products or services successfully commercialized.                                                         |                                                                                                        |                                                                                                   |
| 13. APPROXIMATE NUMBER OF EMPLOYEES                                                                                                                                     | 14. IS APPLICANT A SMALL BUSINESS CONCERN?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                   |
| 15. FIELD(S) OF USE IN WHICH APPLICANT INTENDS TO PRACTICE INVENTION                                                                                                    |                                                                                                        |                                                                                                   |
| 16. IS APPLICANT WILLING TO ACCEPT A LICENSE FOR LESS THAN ALL FIELDS OF USE AS INDICATED IN ITEM 15 ABOVE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                        |                                                                                                   |
| 17. SPECIAL TERMS OR CONDITIONS OF LICENSE DESIRED                                                                                                                      |                                                                                                        |                                                                                                   |
| 18. APPLICANT'S BEST KNOWLEDGE OF EXTENT TO WHICH THE INVENTION IS BEING PRACTICED BY PRIVATE INDUSTRY AND/OR<br>GOVERNMENT, OR IS OTHERWISE AVAILABLE COMMERCIALY      |                                                                                                        |                                                                                                   |
| 19. GEOGRAPHIC AREAS IN WHICH APPLICANT INTENDS TO MAKE, USE, AND/OR SELL THIS INVENTION                                                                                |                                                                                                        |                                                                                                   |
| 20. DETAILED DESCRIPTION OF DEVELOPMENT AND/OR MARKETING FOR EACH FIELD OF USE TO WHICH RIGHTS ARE SOUGHT<br>(PLEASE REVIEW INSTRUCTIONS)                               |                                                                                                        |                                                                                                   |
| 21. ADDITIONAL INFORMATION TO SUPPORT APPLICATION                                                                                                                       |                                                                                                        |                                                                                                   |
| 22. Application is made for a license to practice<br>in the United States, the Government-owned<br>invention identified herein, in accordance<br>with 35 USC 208        | SIGNATURE OF APPLICANT or AUTHORIZED REPRESENTATIVE                                                    | DATE                                                                                              |

## **Agency Disclosure of Estimated Burden (Rev. 11/24)**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0518-0003. The time required to complete this information collection is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Applicants with suggestions for reducing this burden may contact: U.S. Department of Agriculture, Agricultural Research Service, Research, Education, Economics, Administrative Financial Management, Information Technology Services Division, 5601 Sunnyside Ave., Beltsville, MD 20705.

## **Return Completed Application to the Office of Technology Transfer**

Via Email to:

Licensing@usda.gov

or

Via Postal Mail to:

Business Licensing Officer  
U.S. Department of Agriculture  
Agricultural Research Service  
5601 Sunnyside Avenue, Rm 2-2110  
Beltsville, Maryland 20705-5131