

Date:

| | | |
|------------------------|--------------------------------------------------------------|------------|
| Name of the Department | | |
| Application Number | | |
| Name of the Inventors | | |
| Title of Invention | | |
| Date of Filing | | |
| FER Copy | Enclosure: Annexure 1 | |
| FER Replied copy | Enclosure: Annexure 2 | |
| Fees (Including GST) | MCET approved patent agent Fee(Including GST) | Rs: |
| | Patent Office Fee(Including GST) | Rs: |
| | Total : Rs (in words): | |

| Department | Particulars | Proposed budget Rs. | Actual Spent Rs. | Available budget Rs. | Now requested Rs. |
|-------------------|--------------------|--------------------------------|---------------------------------|-------------------------------------|------------------------------|
| | Patent | | | | |

Signature of the Inventor:

(1st inventor behalf all inventor)

Budget Co-Ordinator

Head of the Department

IPR Coordinator

Dean – R&I

Principal

Secretary