



APPLICATION FOR LICENSE TO USAMRDC GOVERNMENT-OWNED INVENTIONS

Thank you for your interest in the technology transfer activities of the U.S. Army Medical Research and Development Command. Your answers to the following questions, which were derived from 37 CFR 404, will provide the foundation for licensing decisions. Please return this form and the required attachments to: ATTN: Dr. Paul Michaels, Director, Office of Research and Technology Applications, U.S. Army Medical Research and Development Command, FCMR-ZCT, 504 Scott Street, Fort Detrick, MD 21702.

IDENTIFICATION OF INVENTIONS(S) FOR WHICH LICENSE IS SOUGHT

(Complete all relevant sections)

U.S. Patent Application(s) Serial Numbers(s), Filing Date(s), and Patent Number(s) (if issued):

Title of Patent Application(s):

Biological Material(s):

Inventor(s):

Source from which you learned of availability of a license to the present invention(s):

INFORMATION ABOUT APPLICANT

1. Name & Address of Applicant:

2. Name, title, address, phone and FAX numbers, and email address of Applicant's licensing representative:

3. Is Applicant a U.S. Corporation? ____ yes ____ no

If no, state country of origin: _____

State of incorporation or citizenship (if an individual): _____

4. Is Applicant a Small Business Firm? ____ yes ____ no other: _____

TYPE OF LICENSE/AGREEMENT SOUGHT *(Please check only one)*

- Exclusive Commercialization License
- Nonexclusive Commercialization License
- Field-of-Use or Geographic Commercialization License
- Nonexclusive Internal Commercial Use License (internal use only – no right to sell or otherwise distribute materials)
- Commercial Evaluation License (for a limited-term evaluation)
- Biological Materials License (generally used for technologies without any intellectual property)

ON SEPARATE ATTACHMENTS TO THIS APPLICATION, PLEASE PROVIDE THE FOLLOWING:

I. DESCRIPTION OF APPLICANT

- A. Nature and type of applicant's business
- B. Number of employees
- C. Corporate/divisional commitment to R&D
- D. Production, sales & marketing plans
- E. Financial resources
- F. Products or services successfully commercialized
- G. Unique capabilities of your company relevant to the licensed technology (*If a prior license application has been submitted to the Office of Research and Technology Applications, USAMRMC, within the past year, you may reference that application for the company description*)
- H. Company annual report
- I. Most recent SEC filings

II. OTHER LICENSES AND USE OF THE INVENTION

- A. Identify any licenses previously granted to the Applicant under federally owned inventions
- B. Identify, to the best of Applicant's knowledge, the extent to which the invention for which a license is sought is being practiced by private industry or Government, or is otherwise available commercially

III. PROPOSED LICENSE TERMS

- A. **Proposed Field of Use** (*required*):
- B. Definitions of licensed products, processes or methods
- C. Claims (if known) of patent/patent application under which the proposed licensed technology would fall
- D. Geographic territories
- E. Duration of license
- F. **Financials** (*as appropriate*)
 1. License execution fee
 2. Patent reimbursement
 3. Royalties
 4. Milestones
 5. Equity
 6. Other
- G. Additional terms for which you wish to make a proposal at this time

IV. RESEARCH, DEVELOPMENT AND MARKETING PLAN

- A. Include a description of product(s) or method(s) to be developed with the licensed technology
- B. For each product or method to be developed provide
 1. A description of expected product research and development programs,
 2. Where relevant, include
 - a. Major preclinical, clinical, regulatory, manufacturing and marketing stages
 - b. Monetary and personnel commitments for each development stage
 - c. The projected time to accomplish each stage of commercial development (*If you will be using the licensed technology in house but will not be directly commercializing the licensed technology or providing a service based on the technology, you need only describe the research program in which the licensed technology will be utilized*)

V. MARKET ANALYSIS

- A. Include relevant market segment(s) the licensed technology will serve when commercialized
- B. Market size and projected growth of relevant markets during the duration of the license
- C. Estimated market share once product is introduced
- D. Sales projections based on market share analysis *(This information need not be provided in applications for commercial evaluation licenses or nonexclusive commercial licenses)*

VI. OTHER INFORMATION WHICH YOU BELIEVE WILL SUPPORT A DETERMINATION TO GRANT THE REQUESTED LICENSE

VII. FOR APPLICANTS FOR EXCLUSIVE OR PARTIALLY EXCLUSIVE LICENSES ONLY

Provide a detailed statement as to

- A. Why Federal and public interests will be best served by exclusive licensing of this invention;
- B. Why expeditious practical application of the invention is unlikely to occur under a nonexclusive license
- C. Why the exclusive licensing of this invention is a reasonable and necessary incentive to attract investments of risk capital
- D. Why the exclusive licensing of this invention will not tend substantially to lessen competition or result in undue market concentration
- E. Why the proposed license terms and scope of exclusivity are not greater than reasonably necessary

I certify, to the best of my knowledge, that all of the information provided on this application and on attachments to this application is true and accurate.

Signature of Applicant or Authorized Representative

Date

Print Name and Title

The commercial and financial responses in this application will be treated as privileged and confidential information as provided in 35 U.S.C. 209(a); and, to the extent permitted by law, will not be accessible under the Freedom of Information Act.