

## Patents Form 14

Patents Act 1977 (Rule 32)

## Request to reinstate a patent application (See the notes on the back of this form)

Concept House Cardiff Road Newport South Wales NP10 8QQ

1. Your reference

- 2. Patent application number
- 3. Full name of the applicant or of each applicant

Patents ADP number (*if you know it*)

4. The patent application was terminated because you failed to meet a legal requirement by the given deadline.

Why did you fail to meet this requirement? (Continue on a separate sheet if necessary)

(See note c)

5

I/We request the above application be reinstated

Signature

Date

 Name, e-mail address, telephone, fax and / or mobile number, if any, of a contact point for the applicant

## Notes

- a) If you need help to fill in this form or you have any questions, please contact the Office on 0300 300 2000.
- b) Write your answers in capital letters using black ink or you may type them.
- c) You should provide supporting evidence with this form. If you do not, the Office will set a deadline for submitting the evidence.
- d) Once you have filled in this form remember to sign and date it.
- e) For details of the fee and ways to pay, please contact the Office.

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