

**APPLICATION FOR LICENSE  
TO PRACTICE INVENTION**

*Return completed application to: Crane Division, Naval Surface Warfare Center  
300 Highway 361, Bldg. 2 Code OCF, Crane IN 47522 FAX 812-854-5170*

**PART I. IDENTIFICATION OF INVENTION**

1. NAVY CASE NO.  
(if known)

2. TITLE OF INVENTION

3. NAME OF INVENTOR(S)

4. PATENT DATA.

a. U.S. PATENT APPLICATION SERIAL NO. \_\_\_\_\_ AND FILING DATE \_\_\_\_\_

b. U.S. PATENT NO. \_\_\_\_\_ AND ISSUE DATE \_\_\_\_\_

5. SOURCE OF INFORMATION CONCERNING THE AVAILABILITY OF A LICENSE ON THIS INVENTION :

**PART II. INFORMATION DESCRIBING APPLICANT**

6. NAME AND ADDRESS OF THE PERSON, COMPANY, PARTNERSHIP  
CORPORATION OR ORGANIZATION APPLYING FOR LICENSE

7. NAME, ADDRESS AND TELEPHONE NUMBER OF REPRESENTATIVE  
OF APPLICANT TO WHOM CORRESPONDENCE SHOULD BE SENT

8. APPLICANT'S CITIZENSHIP OR PLACE OF INCORPORATION

9. IS APPLICANT A SMALL BUSINESS FIRM AS DEFINED AT SECTION 2  
OF PUBLIC LAW 85-536 (15 USC 632) AND IMPLEMENTING  
REGULATIONS OF THE ADMINISTRATOR OF THE SMALL BUSINESS  
ADMINISTRATION?

YES \_\_\_\_ NO \_\_\_\_

10. a. IS APPLICANT DIRECTLY OR INDIRECTLY CONTROLLED BY A FOREIGN COMPANY OR GOVERNMENT? YES \_\_\_\_ NO \_\_\_\_

IF YES, PLEASE IDENTIFY COMPANY OR GOVERNMENT:

b. IS APPLICANT DEBARRED, SUSPENDED, PROPOSED FOR DEBARMENT OR DECLARED INELIGIBLE FOR  
PARTICIPATION IN PROCUREMENT PROGRAMS?

YES \_\_\_\_ NO \_\_\_\_

11. NATURE AND TYPE OF APPLICANT'S BUSINESS IDENTIFYING PRODUCTS OR SERVICES WHICH THE APPLICANT HAS SUCCESSFULLY  
COMMERCIALIZED.

12. APPROXIMATE NUMBER OF APPLICANT'S EMPLOYEES

13. STATE APPLICANT'S BEST KNOWLEDGE OF THE EXTENT TO WHICH THE INVENTION IS BEING PRACTICED BY PRIVATE INDUSTRY OR THE  
GOVERNMENT, OR BOTH, OR IS OTHERWISE AVAILABLE COMMERCIALY

**PART III. PLAN FOR DEVELOPMENT AND/OR MARKETING OF THE INVENTION** (Additional pages may be attached.)

**14. DESCRIBE IN DETAIL APPLICANTS PLAN FOR DEVELOPMENT AN/OR MARKETING OF THE INVENTION:**

a. STATE THE TIME WHICH APPLICANT BELIEVES WILL BE REQUIRED TO BRING THE INVENTION TO PRACTICAL APPLICATION. INCLUDE MILESTONES AND A TARGET TIME BY WHICH APPLICANT WILL HAVE A COMMERCIAL PRODUCT AVAILABLE TO THE PUBLIC.

b. STATE THE NATURE AND AMOUNT OF ANTICIPATED INVESTMENT OF CAPITAL AND OTHER RESOURCES WHICH APPLICANT BELIEVES WILL BE REQUIRED TO MAKE THE INVENTION AVAILABLE TO THE PUBLIC

c. STATE THE APPLICANT'S CAPABILITY AND INTENTION TO FULFILL THE PLAN, INCLUDING INFORMATION REGARDING MANUFACTURING (SPECIFY EVERY COUNTRY WHERE PRODUCTS EMBODYING THE INVENTION OR PRODUCED THROUGH THE USE OF THE INVENTION WILL BE MANUFACTURED), MARKETING, FINANCIAL AND TECHNICAL RESOURCES

d. STATE THE FIELDS OF USE FOR WHICH APPLICANT INTENDS TO PRACTICE THIS INVENTION

e. STATE THE GEOGRAPHIC AREAS IN WHICH THE APPLICANT INTENDS TO MANUFACTURE ANY PRODUCTS EMBODYING THE INVENTION AND THE GEOGRAPHIC AREAS WHERE APPLICANT INTENDS TO USE AND/OR SELL THE INVENTION

f. STATE THE PROJECTED ANNUAL SALES OF THE INVENTION FOR SEVERAL YEARS AFTER THE DATE IT IS TO BE AVAILABLE TO THE PUBLIC

**PART IV. OTHER**

15. STATE MINIMUM NUMBER OF YEARS FOR WHICH APPLICANT SEEKS A LICENSE

16. IDENTIFY LICENSES PREVIOUSLY GRANTED TO APPLICANT UNDER FEDERALLY-OWNED INVENTIONS

17. STATE ANY OTHER INFORMATION WHICH THE APPLICANT BELIEVES WILL SUPPORT A DETERMINATION TO GRANT THE LICENSE TO APPLICANT

18. TYPE OF LICENSE REQUESTED

NONEXCLUSIVE \_\_\_\_

EXCLUSIVE \_\_\_\_

PARTIALLY EXCLUSIVE \_\_\_\_  
(Identify Limitations)

IF AN EXCLUSIVE OR PARTIALLY EXCLUSIVE LICENSE IS REQUESTED, THE APPLICANT MUST PROVIDE REASONS WHY EXCLUSIVITY IS NECESSARY

19. SIGNATURE OF APPLICANT OR REPRESENTATIVE OF APPLICANT

DATE