UNITED STATES DEPARTMENT OF COMMERCE

**TECHNOLOGY PARTNERSHIPS OFFICE  
100 Bureau Drive, MS 2200  
Gaithersburg, MD 20899-2200  
T: 301-975-8408; F: (301) 869-2751;** [**ipp@nist.gov**](mailto:ipp@nist.gov)

NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY



NIST Patent Licensing Application

**Company Name:** Company Name  
**Mailing Address:** Mailing Address   
**City/State:** City/State **Zip Code:** Zip  
**Telephone:** Telephone # **Fax:** Fax # **E-Mail:** E-mail Address  
**DUNS#:** DUNS# **Tax Identification Number (TIN):** TIN#  
**Place of Incorporation:** Place of Incorporation **Number of Employees:** #  
**Small business firm as defined in 37 C.F.R. 404.3(c):** ☐yes ☐no

**Point of Contact:** POC Name  
**Mailing Address:** Street Address and PO Box address, if any   
**City/State:** City/State **Zip Code:** Zip  
**Telephone:** Telephone # **Fax:** Fax # **E-Mail:** E-mail Address

**1. Title of the NIST patent or patent application:** Title

**2. Patent # or patent application # (NIST Docket #, if known):** Patent/application #

**3. Information source concerning the availability of the Invention?** Source of info.

**4. Type of license sought:** ☐Exclusive ☐Non-Exclusive ☐Exclusive dependent upon price

**5. Field(s) of Use to practice the Invention:** Field(s) of Use **6. Country(ies) in which the applicant intends to manufacture any products embodying the Invention and Country(ies) in which the applicant intends to use and/or sell the Invention:**country(ies)

**7. List all licenses under federally-owned Inventions, if any, previously granted to the applicant:** licenses

The following information will be treated as Proprietary Information *if so marked*:

**8. A description of your current business, including products or services successfully commercialized, annual sales, any unique capabilities of your company relative to the licensed technology, or other relevant information to support your application:**

#9 Note: this field will expand.

**9. A detailed description of your plan for development and/or marketing of the Invention, including:**

1. Commercial Applications. Describe the commercial products, methods or services to be developed with the licensed technology. How will the licensed technology be incorporated into, or enable functionality of, the products/processes you expect to commercialize?
2. Development Strategy. Describe your expected product research development program. When would you expect to have your first prototype built? When would you expect to have a finished product ready for sale? When would you expect to make your first commercial sale? Explain your manufacturing, distribution, sales and marketing strategies.
3. Market Analysis. Describe the industry, including its current market size, growth rate and other trends. Describe your target market and potential customers. What is your estimate of the share of the anticipated markets your company expects to capture during each of the next 5 years? What competitive products or services are currently available? What are the competitive advantages of your product over the current options? What are the barriers and regulatory restrictions that may hinder you as you enter the market? What is the anticipated market price and gross margin levels for the product/process to be derived from the licensed technology?
4. Resources. Describe your available resources including technical, manufacturing, marketing and financial. How will they be employed to carry out the plan? Provide the nature and status of any third party relationships crucial to commercialization including, but not limited to, other licenses required, sublicenses of the licensed NIST Invention, financing, research, marketing, distribution and manufacturing.
5. Financial Strategy. Include the amount and timing of anticipated capital investment and other resources required; sales projections; and *pro-forma* financial projections indicating product pricing and annual sales volume for at least the first 5 years.

**10. FOR APPLICANTS FOR EXCLUSIVE OR PARTIALLY EXCLUSIVE LICENSES ONLY**

A detailed statement as to 1) why Federal and public interests will be best served by exclusive licensing of this invention; 2) why expeditious practical application of the invention is unlikely to occur under a nonexclusive license; 3) why the exclusive licensing of this invention is a reasonable and necessary incentive to attract investments of risk capital; and 4) why the proposed license terms and scope of exclusivity are not greater than reasonably necessary.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: date

Print Name: Signatory name

Title: Signatory title

Please submit a hardcopy of the signed application via mail to:

National Institute of Standards and Technology

Senior Licensing Officer, TPO

100 Bureau Drive, Stop 2200

Gaithersburg, MD 20899-2200

Phone: (301) 975-8408; Fax: (301) 869-2751

And an electronic copy via e-mail to: [ipp@nist.gov](mailto:ipp@nist.gov)