

**REGISTRY OF PLANT VARIETIES
BRUNEI DARUSSALAM**

**Plant Varieties Protection Order, 2015
Plant Varieties Protection Rules, 2016**

REQUEST FOR EXAMINATION BY LOCAL PRESCRIBED EXAMINATION AUTHORITY

PART 1	Your reference	<input type="text"/>
PART 2	PVP No.	<input type="text"/>
PART 3	Particulars of applicant for grant of protection Name <input data-bbox="357 786 1374 920" type="text"/> Address <input data-bbox="357 1010 1374 1442" type="text"/>	

PART 4

Address for service

Name

Address

Telephone

Fax

Signature _____

Date Month Year

Name _____

(in block letters)

Official capacity of signatory

General Instructions

- a. *A separate form should be used for each application for grant.*
- b. *This form when completed should be filed with the prescribed fee.*
- c. *If there is not enough space to fill in any part of this form, please use separate sheets.*
- d. *Please note that the address for service must be an address in Brunei Darussalam. Your attention is drawn to rule 9 of the Plant Varieties Protection Rules, 2016.*
- e. *Once you have filled in the form, please remember to sign and date it.*