





**III. Author information (must be natural person(s))**

**Author is the applicant** (Please cross out if owner is the same as applicant)

(Please cross out the type of person and fill in the required information accordingly if it is different from applicant. If authors are more than one, please add new page)

**Natural person**

ID document (ID card or passport):
<input type="text"/>
ID document number:
<input type="text"/>
Country:
<input type="text"/>
First name:
<input type="text"/>
Middle name:
<input type="text"/>
Last name:
<input type="text"/>

**Address** (Residence address if Person OR Head office address if Organization/ Foreigners fill in only Phone-Email-Country-Province/City)

Phone:	<input type="text"/>	Sector:	<input type="text"/>
Email:	<input type="text"/>	Cell:	<input type="text"/>
Country:	<input type="text"/>	Street name and house number:	<input type="text"/>
Province:	<input type="text"/>	P. O. Box:	<input type="text"/>
District:	<input type="text"/>		

**Representative of owner**

ID document (ID card or passport):	<input type="text"/>	First Name:	<input type="text"/>
ID document number:	<input type="text"/>	Middle Name:	<input type="text"/>
Country:	<input type="text"/>	Last Name:	<input type="text"/>

**Address** (Foreigners fill in only Phone-Email-Country-Province/City)

Phone:	<input type="text"/>	Sector:	<input type="text"/>
Email:	<input type="text"/>	Cell:	<input type="text"/>
Country:	<input type="text"/>	Street name and house number:	<input type="text"/>
Province:	<input type="text"/>	P. O. Box:	<input type="text"/>
District:	<input type="text"/>		

**IV. Holder information**

**Author is the Holder** (Please cross out if Holder is the same as applicant)

(Please cross out the type of author and fill in the required information accordingly if it is different from applicant. If Holder(s) are more than one, please add new page)

**Natural person**

**Organization**

ID document (ID card or passport):  
[Grid]  
ID document number:  
[Grid]  
Country:  
[Grid]  
First name:  
[Grid]  
Middle name:  
[Grid]  
Last name:  
[Grid]

Company code/Enterprise code:  
[Grid]  
OR  
Registration number:  
[Grid]  
Registered Name:  
[Grid]

**Address** (Residence address if Person OR Head office address if Organization/ Foreigners fill in only Phone-Email-Country-Province/City)

Phone: [Grid] Sector: [Grid]  
Email: [Grid] Cell: [Grid]  
Country: [Grid] Street name and house number: [Grid]  
Province: [Grid] P. O. Box: [Grid]  
District: [Grid]

**Representative of Holder**

ID document (ID card or passport): [Grid] First Name: [Grid]  
ID document number: [Grid] Middle Name: [Grid]  
Country: [Grid] Last Name: [Grid]

**Address** (Foreigners fill in only Phone-Email-Country-Province/City)

Phone: [Grid] Sector: [Grid]  
Email: [Grid] Cell: [Grid]  
Country: [Grid] Street name and house number: [Grid]  
Province: [Grid] P. O. Box: [Grid]  
District: [Grid]



***VI. Summary or description of Work***

***VII. Attachments***

Copy of the Work

Fee payment receipt slip

Copy of ID document

Registration certificate

Power of attorney

Other .....

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I hereby certify that the information given to the best of my knowledge is true, complete and all signatures in the attachments are made by the persons stated. I also understand that any false declaration may lead to prosecution.

Date: ..... Applicant's Signature: .....