

The Animal and Plant Health Agency Scottish Government Welsh Government

Department of Agriculture, Environment and Rural Affairs, Northern Ireland

## Application for Plant Breeders' Rights in the United Kingdom

Plant Varieties Act 1997 and

Plant Breeders' Rights Regulations 1998

Please read the Notes for Guidance at the end of this form, which include the arrangements for the payment of the administration fee. The completed application form should be returned, electronically, together with the Technical Questionnaire and if appropriate the Authorisation of Agent and Assignment of Rights forms to:

NLPBR-Applications@apha.gov.uk

Any queries should be addressed to:

The Animal and Plant Health Agency, Eastbrook, Shaftesbury Road, Cambridge, CB2 8DR Telephone 0208 026 5993.

| 1.  | Applicant's name and full postal address: (see note 1)  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   | Postcode  |  |  |  |  |  |  |
|   | or ZIP:   |  |  |  |  |  |  |
|   | Telephone number (incl. national dialling code):  |  |  |  |  |  |  |
|   | Email address:  |  |  |  |  |  |  |
| <ol> <li>Name and full postal address of the person who bred or discovered and developed the variety (or suc<br/>in title) if different from above: (see note 1)</li> </ol> |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   | Destroyle   |  |  |  |  |  |  |
|   | Postcode or ZIP:  |  |  |  |  |  |  |
| Telephone number (incl. national dialling code):  |   |  |  |  |  |  |  |
|   | Email address:  |  |  |  |  |  |  |
| 3.  | Full postal address for correspondence if different from above: (see note 1)                                |  |  |  |  |  |  |
| J.  | i un postar address for correspondence il different fronti above. (see flote 1)                             |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   | Postcode  |  |  |  |  |  |  |
|   | or ZIP:   |  |  |  |  |  |  |
|   | Telephone number (incl. national dialling code):  |  |  |  |  |  |  |
|   | Email address:  |  |  |  |  |  |  |
| •   | This is the address: of the agent for service   |  |  |  |  |  |  |
|   | An agent is authorised to act for the applicant on all aspects of an application, including instructions to |  |  |  |  |  |  |
|   | withdraw applications, or delete from a National List.  |  |  |  |  |  |  |
|   | Details of plant variety  |  |  |  |  |  |  |
| 4.  | Species or group to which the variety belongs:  |  |  |  |  |  |  |
| 5.  | 5. Breeder's reference number   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| 6.  | Where appropriate proposed variety denomination   |  |  |  |  |  |  |

| 7.                                   | Cou  | untry in which the variety was bred or discovered and developed  |                        |   |                      |                  |                 |  |  |
|--------------------------------------|--|--|------------------------|---|----------------------|------------------|-----------------|--|--|
| 8.                                   | Has there been any sale or other disposal of propagating or harvested material of the variety for the purposes, of exploiting the variety either in the United Kingdom or abroad, prior to the date of this application? |  |                        |   |                      |                  |                 |  |  |
|                                      | • •  |  |                        | Yes   | No                   |                  |                 |  |  |
|                                      | If <b>'Y</b>   | Country  |                        |   | (b) Date of first    | sale or disposal |                 |  |  |
|                                      | (a)  | · L  | and conditions:        |   | (b) Date of first    | sale of disposal |                 |  |  |
|                                      | (c)  | on what terms  | and conditions.        |   |                      |                  |                 |  |  |
| 9.                                   | (a)  | Please give d  |                        | s for rights in other o                       |                      |                  |                 |  |  |
|                                      |  | С  | Country                | Date of Application                           | Application No.      | Name or Designat | ion applied for |  |  |
|                                      |  |  |                        |   |                      |                  |                 |  |  |
|                                      |  |  |                        |   |                      |                  |                 |  |  |
|                                      |  |  |                        |   |                      |                  |                 |  |  |
|                                      | (b)  |  |                        |   |                      |                  |                 |  |  |
|                                      |  | If 'YES' which   | n of the applications  | detailed above is th                          | e subject of your    | claim?           |                 |  |  |
|                                      |  |  |                        |   |                      |                  |                 |  |  |
|                                      | (c)  | If DUS tests are being conducted or have been completed in another country, it may be possible to purchase the report. If so do you wish a DUS report to be purchased?  Yes No   |                        |   |                      |                  |                 |  |  |
|                                      | (d)  |  |                        |   |                      |                  |                 |  |  |
|                                      | ( )  |  |                        | <u>,                                     </u> | ·                    | ·                |                 |  |  |
|                                      | (e)  | If the report ca   | annot be purchased     | I do you wish tests to                        | be carried out in    | the UK? Yes      | No No           |  |  |
| 10.                                  |  | the variety, or does the variety contain, a genetically modified organism as defined by Section 106 of the   |                        |   |                      |                  |                 |  |  |
|                                      | Env  | nvironmental Protection Act 1990?  Yes No  |                        |   |                      |                  |                 |  |  |
|                                      | of s   | 'YES' please provide a copy of the application for consent to release or market, or where received, details if such consent and any conditions attached thereto. This includes consents issued by other EU Member states under the provisions of Directive EC 2001/18. |                        |   |                      |                  |                 |  |  |
|                                      | aratio   |  | at af way face 1       | on and harrest a con-                         |                      | Assallantina E   |                 |  |  |
|                                      |  |  | र्भ of my/our knowledg | ge and belief the staten                      | nents made in this i |                  | correct         |  |  |
| Sign                                 | ature  | of Applicant   |                        | (a sining all airms afrons contains           | il d)                | Date             |                 |  |  |
| N. a. a.a.                           | - ! F  | 01.001/.10#4.00  |                        | (original signature unless                    | emailed)             |                  |                 |  |  |
|                                      |  | BLOCK letters  |                        |   |                      |                  |                 |  |  |
| For and on behalf of<br>(see note 2) |  |  |                        |   |                      |                  |                 |  |  |

Data Protection
Any personal data which you have provided on this form will be processed in accordance with the Data Protection Act 2018. For information on how we handle personal data please go to www.gov.uk and search Animal and Plant Health Agency personal information charter.

## **Notes for Guidance**

- 1. (a) Section 4(3) of the Plant Varieties Act 1997 stipulates that the applicant for rights must be the person who bred or discovered and developed the variety, or his successor in title. Documentary evidence such as an assignment of rights must be supplied by any successor in title.
  - (b) Where the application is made by or through an agent it must be accompanied by an authority completed by the applicant.
  - (c) Where the applicant resides outside the EU an address for service or agent **must** be nominated within the EU.
- 2. The application may be completed by an individual person, a partnership or a body corporate. Where an application is made on behalf of a company it must be signed by a person qualified to do so.
- 3. Priority may be claimed in respect of the earliest of any applications submitted in the previous 12 months in any other country which is a member of the Union for the Protection of New Varieties of Plants (UPOV). Further information is available in the Plants Breeders' Rights Handbook or from the address at the top of this form. Priority may also be claimed in respect of applications for Community Rights.
- 4. For current Plant Breeders' Rights fees please see https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/426004/pbr-fees.pdf.
- 5. (a) For BACS payments the completed Remittance Advice Slip (RAS1 or RAS2) should be sent by e-mail to <a href="mailto:sscl.receipts@gov.sscl.com">sscl.receipts@gov.sscl.com</a>.
  - (b) For payment by cheque the completed Remittance Advice Slip (RAS1 or RAS2) with a cheque made payable to the Shared Services Connected Ltd, Moorside, Monks Cross Drive, Huntington, York, YO32 9GZ.
  - (c) For payment by credit card: Phone +44(0) 1633613800