

		<p>d. Plant parts (whole plant, seed, stem, bark, leaf, flower, fruit, root, rhizome, etc.)</p> <p>e. Source of access (Market/trader/ wild/ self-cultivated/repository/ others)</p> <p>f. Geographical location (village, taluk, district, state). If procured from trader/institute, entity's name, address, and contact details to be provided. If procured from repository/institution, then origin of collection is to be provided.</p>
<b>(3) Details of commercialisation</b>		
(i)	Details of each country where the invention is sought to be commercialized	<p>i. Name of the country (Drop-down)</p> <p>ii. Patent number</p> <p>iii. Mode of commercialization (Licensing/assignment/self-manufacture/transfer of particular patent rights alone/any other mode)</p> <p>iv. Details of each licensee/assignee/ transferee/ any other person <i>(Names with Postal addresses including PIN code, email, mobile and alternate mobile numbers and/or landline number)</i></p> <p>v. Period of commercialization <i>(in years)</i></p> <p>vi. Amount of revenue generated, if any / likely to be generated</p>
<b>(4) Any other information considered relevant</b>		
<b>(5) Details of remittance of application fee</b> (Mode of payment, transaction ID, amount, date, etc.)		
<b>Declaration</b>		
<p>I/We declare that: The information provided in the application form is true and correct to the best of my/our knowledge and belief and that it conceals nothing and that no part of it is false.</p> <p>a. I/We shall be responsible for any incorrect or wrong information provided.</p> <p>b. Prior intimation to the concerned State Biodiversity Board or Union territory Biodiversity Council shall be provided for accessing the biological resource and/or traditional knowledge associated thereto for commercial utilization as per section 7 of the Act.</p>		
Place:		Signature:
Date:		Name:

**FORM-10***{See section 36A of the Act and rule 18(1)}*

**Form for declaration of the use of biological resource(s) and/or associated traditional knowledge obtained from any foreign country, in India**

Sl .no	Particulars	
(1)	Name of the person or entity	
(2)	Category of the applicant	Individual Individual and Entity Entity
(3)	Status of the applicant	(Drop down menu) Indian NRI

		Non-Indian Entity covered under section 3(2) of the Act Entity covered under section 7 of the Act
(4)	<b>Complete address</b> <i>Postal address including PIN code, email, mobile and alternate mobile numbers and/or landline number)</i>	
(5)	<b>Details of biological resource used</b>	
(i)	Scientific and common name of the biological resource	
(ii)	Country from where biological resource was/were accessed	
(iii)	Whether the country from which the biological resource were accessed is a Party to Nagoya Protocol	Yes/No (Please tick whichever is applicable)
(6)	<b>Whether approval of the Competent National Authority of the country of origin of biological resource has been obtained</b>	Yes/No [drop down- list of country]
(i)	Details of the ABS-CH Unique Identifier of internationally recognized certificate of compliance ( <i>if available</i> ).	
(ii)	If the internationally recognized certificate of compliance is not available, the following information may be provided	
	(a) Source of the biological resource	
	(b) Purpose of the utilization of the biological resource	Research Commercial utilization Obtaining intellectual property rights Others
(iii)	Details of patent applications filed, if any	
<b>Declaration</b>		
I/we hereby declare that I/we have complied with the provisions of prior informed consent and mutually agreed terms of the country from where the biological resources have been obtained. I/ we hereby declare and solemnly affirm that the information provided above is true and correct to the best of my knowledge.		
<b>Place:</b>		
<b>Date:</b>		<b>Signature of the Applicant</b>

**FORM-11***{See section 7 of the Act and rule 19(1)}***Application cum format for obtaining certificate origin for cultivated medicinal plants***(to be issued by the Biodiversity Management Committee)*

<b>Unique Identity Number</b> ( <i>Alpha numeric to be assigned by the BMC</i> ) CODE: State/District/ Mandal/ Taluk/ Town/ Village/ BMC/ Year/ Company Name / numerical Number			
<b>Sl.no</b>	<b>Particulars</b>	<b>:</b>	<b>To be filled by the applicant</b>
(1)	<b>Name of the Biodiversity Management Committee</b>	:	..... (Village or Town / District / State / Union Territory)
(2)	<b>Name of the applicant</b>	:	
(3)	<b>Complete Address</b> <i>(Postal address including PIN code, email, mobile and alternate mobile numbers and/or landline number)</i>	:	
(4)	<b>Name of the species and varieties to be accessed</b>	:	Common name Scientific name (Genus and species/variety/strain, (if known)