RDB RWANDA DEVELOPMENT BOARD

ORG
Office of the Registrar General

APPLICATION FOR COPYRIGHT

THE INTELLECTUAL PROPERTY LAW Nº 31/2009 OF 26/10/2009
ARTICLE 197

I. *Application*

☐New application (*Fill in all relevant fields)*

Title of Work:

Sub-title of Work:

Group of Work: (level 1)

Literature	☐	Artistic	☐
Dramatic	☐	Scientific	☐

Sub-group (level 2) of Work:.....
Detailed group of Work (level 3):.....

Date of production: ☐☐☐☐☐☐☐☐ *(date/month/year)*
Publication:
The Work is published ☐ Yes ☐ No

Date of first publication: ☐☐☐☐☐☐☐☐ *(date/month/year)*

Place: City..... Province..... Country.....

Material support:.....

ISBN code: (for books only) .....

☐ Claim of priority filed outside Rwanda
Priority date

Application number *(if known)*

Country

II. *Applicant information*(*Please cross out the type of applicant and fill in the required information accordingly)*

☐**Natural person**

ID document (ID card or passport):

ID document number:

Country:

First name:

Middle name:

Last name:

☐**Organization**

Company code/Enterprise code:

OR

Registration number:

Registered Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

Representative of applicant

ID document (ID card or passport):

ID document number:

Country:

First Name:

Middle Name:

Last Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

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):

ID document number:

Country:

First name:

Middle name:

Last name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

Representative of owner

ID document (ID card or passport):

ID document number:

Country:

First Name:

Middle Name:

Last Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

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**

ID document (ID card or passport):

ID document number:

Country:

First name:

Middle name:

Last name:

☐**Organization**

Company code/Enterprise code:

OR

Registration number:

Registered Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

Representative of Holder

ID document (ID card or passport):

ID document number:

Country:

First Name:

Middle Name:

Last Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

V. *Agent information* (*Please cross out the type of agent and fill in the required information accordingly*)

☐**Natural person** ☐**Organization**

ID document (ID card or passport):

ID document number:

Country:

First name:

Middle name:

Last name:

Company code/Enterprise code:

OR

Registration number:

Registered Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

Representative of agent

ID document (ID card or passport):

ID document number:

Country:

First Name:

Middle Name:

Last Name:

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

Phone:

Email:

Country:

Province:

District:

Sector:

Cell:

Street name and house number:

P. O. Box:

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 .....
.....
.....

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: …….....