



知識產權署

Intellectual Property Department

For official use

## Patents Form P15

**Filing of notice of revocation of a standard patent (R)**  
**Application for revocation of a standard patent (R)**  
**On reference to the Registrar of Patents to revoke a patent**

Patents Ordinance (Cap. 514)  
 Patents (General) Rules (Cap. 514C)

**Important notes****1. General notes:**

- a. Please complete this form in English unless otherwise stated.
- b. By submitting this form, you will be treated as having given consent to the Patents Registry and its service provider to copy or communicate all the information provided to any third party (in or outside Hong Kong) who assists or supports the Patents Registry in performing its functions under the Patents Ordinance, Cap. 514 and its subsidiary legislation.
- c. This form must be signed and dated.
- d. If there is not enough space for any part on this form, please continue on an additional sheet. Number each additional sheet and state the number of additional sheet(s).
- e. Please enquire through the following means:
  - E-mail: [enquiry@ipd.gov.hk](mailto:enquiry@ipd.gov.hk)
  - Internet homepage address: [www.ipd.gov.hk](http://www.ipd.gov.hk)
- f. The Patents Ordinance, Cap. 514 and Patents (General) Rules, Cap. 514C can be viewed at [www.ipd.gov.hk](http://www.ipd.gov.hk).

**2. Use of personal data:**

Personal data collected by the Registrar of Patents ("the Registrar") in the forms filed with the Registrar will be used for the purposes set out in the Personal Information Collection Statement at [https://www.ipd.gov.hk/eng/personal\\_information.htm](https://www.ipd.gov.hk/eng/personal_information.htm).

**3. Use of other information:**

- a. The Patents Registry will use any information relating to any commercial enterprise or entity provided in this form and any document(s) filed in relation to it for processing your application, request or notice, and for the purposes of collection set out in the Personal Information Collection Statement at [https://www.ipd.gov.hk/eng/personal\\_information.htm](https://www.ipd.gov.hk/eng/personal_information.htm). **They may be made available for public inspection, in full or in part, pursuant to section 147 of the Patents Ordinance, Cap. 514. Such information may be accessed through the Internet.**
- b. **DO NOT include any business information of your own or that of third parties which you consider to be confidential or commercially sensitive.** Where such information is included in this form or any document(s) filed in relation to it, the Registrar will treat it an express and voluntary consent given by you and any such third party to disclosure of all such information for the purpose of public inspection.

**4. Submission of application/request/notice:**

In person or by mail with the appropriate fee to the Registrar of Patents, 24/F, Wu Chung House, No. 213 Queen's Road East, Wanchai, Hong Kong. The fee schedule can be viewed at [www.ipd.gov.hk/eng/forms\\_fees.htm](http://www.ipd.gov.hk/eng/forms_fees.htm). Payment can be made in person by cash, or by sending a cheque/bank draft (in Hong Kong dollars which can be cleared in Hong Kong) made payable to THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION.

This form can also be submitted electronically. For details, please visit IPD's e-Filing System at <https://iponline.ipd.gov.hk/index.html>.

\*Denotes mandatory fields

**01. Reference****Filer's reference**

**02. \*Patent no.****Patent no.**

This form is for one patent.

**03. \*Full name of the proprietor(s)****(a) Name in English**

**(b) Name in Chinese**  
(if applicable)
**04. Details of the person(s) (other than the proprietor) applying for the revocation**

If the person(s) applying for the revocation is /are the proprietor(s) mentioned in Part 03 above, please leave this part empty.

**(a) Name in English**

**(b) Name in Chinese**  
(if applicable)
**(c) Address**

Flat/Floor/Building
Street/District
Country/Territory/Area

**05. \*Type of application for revocation**

Please refer to section 36, Patents (General) Rules for details of the prescribed opposition or revocation proceedings in the designated patent office for the purpose of section 44, Patents Ordinance.

**(a) Type of application for revocation:**Please mark one box only.
☐
**giving notice of revocation under section 44(2), Patents Ordinance**
☐
**applying for revocation under section 44(4), Patents Ordinance**
☐
**making reference under section 49(1), Patents Ordinance**

**(b) Date of publication of the revocation by the designated patent office**

If this application is made under section 49(1), Patents Ordinance, please leave this box empty.

DD-MM-YYYY

**06. Supporting document(s)**

Please refer to section 44, Patents Ordinance, sections 37 and 41, Patents (General) Rules as appropriate.

**Supporting document(s) filed with this form**

Please mark the appropriate box(es).

☐

a verified copy of the order of revocation

☐

evidence of the statement as to revocation of the corresponding designated patent in the designated patent office

☐

other documents evidencing the revocation (please specify)

☐

a statement setting out the basis on which the reference under section 49(1), Patents Ordinance is made

☐

prescribed translation of the submitted document(s) or evidence required by section 104(4), Patents Ordinance and section 56, Patents (General) Rules

**07. Verification of document(s)**

Please mark the box below if applicable.

☐

I/We confirm that the attached copy of the order of revocation or an entry in the patent register of the designated patent office showing the revocation of the designated patent is a true copy of the document issued by or kept at the relevant designated patent office.

**08. \*Address for service**

The address for services provided in this part shall be treated as being in substitution for any address for service previously filed.

All correspondence and/or document(s) will be sent to the address below.

**\*(a) Name****\*(b) Address**

You must provide an address for service in Hong Kong. Please note that a P.O. Box or "care of" address is not acceptable.

Flat/Floor/Building

Street/District

**HONG KONG****(c) Telephone no.**

In Hong Kong

(d) Fax no.  
In Hong Kong

## 09. Agent's details

Go to Part 10 if you are NOT an agent.

If you have been duly authorized to act as an agent, please complete this part. The details provided in this part shall be treated as being in substitution for any agent's details previously filed.

(a) Name

(b) Address

You must provide an address in Hong Kong where you reside or carry on your business activities. Please note that a P.O. Box or "care of" address is not acceptable.

Flat/Floor/Building

Street/District

**HONG KONG**

## 10. \*Signature

I/We confirm that I/we have read and understood the "Important notes" of this form.

\*(a) Authorized signature

\*(b) Name of signatory

\*(c) Official capacity of signatory

E.g. Authorized person, Director, Partner or Principal Officer of Proprietor(s)/the person(s) (other than the proprietor)/Agent, Proprietor/ the person(s) (other than the proprietor) in person

\*(d) Date

DD-MM-YYYY

## 11. Attachment(s)

Total number of attachment(s)