**ICAR-National Institute of Veterinary Epidemiology and Disease Informatics (NIVEDI),**

P.B.6450, Ramagondanahalli, Yelahanka, Bengaluru-560064

Phone: +91-080-23093111; Fax: +91-080-23093222.

E-mail: [director.nivedi@icar.gov.in](mailto:sb.shivachandra@icar.gov.in) or itmunivedi@gmail.com

Date: ......., 20

To

**The Director,**

ICAR-National Institute of Veterinary Epidemiology

and Disease Informatics (NIVEDI),P.B.6450,

Ramagondanahalli, Yelahanka, Bengaluru-560064, Karnataka.

Subject: Undertaking and Declaration in regard to Invention made by the undersigned.

In regard to the invention made by me/us and my/our request to forward the proposal for filing application for Patent, we reiterate the following facts:

i) That the title of our invention is .: ..... ..(to be entered by inventors) .. .. .......... ..... . .............. . .... .

ii) That the invention made by us is completely new and is on account of inventive steps taken by us. It has not been published.

iii) There is no lawful ground of objection to the grant of patent in respect of our invention.

iv) I/We have perused the available literature on the subject and I/We confirm that no invention has been made by any person of the type mentioned an item no. (i) above.

v) I/We undertake to keep you posted of developments in regard to correspondence business discussion if any, pertaining to the above mentioned invention, in future.

vi) I/We give below the declaration for assignment of rights to ICAR.

2. In view of the above facts, I/W e request you to kindly expedite the filing of the application.

Yours faithfully,

Date: ..................

Place: ................

Name(s) of Inventor(s)

1. Name: (Signature)

2. Name: (Signature)

Copy to:

1) The DDG (Animal Science), Indian Council of Agricultural Research (ICAR),

Krishi Bhawan, New Delhi - 110001.

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**DECLARATION BY INVENTOR(S)**

I/We ...............(Name(s) of Inventor(s) with Designation, **ICAR-NIVEDI, Bengaluru, Karnataka**, declare that all rights for the invention................(Title of Patent as given in the Application)......................... are assigned by me/us to the applicant "Indian Council of Agricultural Research (lCAR), Krishi Bhawan, 1, Dr. Rajendra Prasad Road, New Delhi - 110001." and the application is signed on behalf of the assignee by the authorized official of ICAR.

Dated this ............... day...............month of 20........year.. ...

INVENTOR NAME SIGNATURES

1. ------------------------- -----------------------
2. ------------------------- -----------------------
3. ------------------------- -----------------------
4. ------------------------- -----------------------

Witnesses (Two):

Name Designation Signatures

l. ...... . .......... .. .. .. ... ..

2. ........ .. .. .. ..... .... .... ..

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