

Change to Class 1 Licence Application Form

Instructions:

Please complete this form in its entirety and submit it to the College of Patent Agents and Trademark Agents (CPATA) via email, along with all required supporting documentation, to the attention of the Director of Registration at registration-inscription@cpata-cabamc.ca. Details of the application process and required documentation can be found at: <https://cpata-cabamc.ca/en/your-practice/licensure/>

Section 1: Personal Information

Current Legal Name

First Name:

Middle Name:

Last Name:

CPATA Registration Number:

Section 2: Change of Licence Type

Please select all that apply:

I am applying to change from a Class 2 to a Class 1 Patent Agent Licence.

I am applying to change from a Class 2 to a Class 1 Trademark Agent Licence.

I am applying to change from a Class 4 to a Class 1 Patent Agent Licence.

I am applying to change from a Class 4 to a Class 1 Trademark Agent Licence.

Section 3: Current Contact Information

Business Address

Company Name:

Address:

Unit/Suite:

City:

Province:

Country:

Postal Code:

Business Email Address:

Business Phone:

Extension:

Home Address

Address:

Unit/Suite:

City:

Province:

Country:

Postal Code:

Personal Email Address:

Preferred Phone:

Section 4: Professional Employment History

Please attach separate sheets as needed.

Employer Name	Job Title	Start Date	End Date

Section 5: Declarations & Undertaking

I declare that I will:

Practise with integrity;

Uphold the independence of the patent and trademark professions; and

Comply with the Code of Professional Conduct.

I undertake to CPATA I will report, in writing, if:

- I am served with an application for bankruptcy, make an assignment of property for the benefit of creditors, or present a proposal in bankruptcy to creditors under the *Bankruptcy and Insolvency Act*;
- I have been given a judgment by a court;
- I am personally subject to an order for costs;
- I am charged with, plead guilty to or am found guilty of any offence under the *Criminal Code*, the *Controlled Drugs and Substances Act*, the *Income Tax Act*, the *Excise Tax Act* or under a provincial securities act, employment standards or official languages, or any other provincial act that creates an offence that implicates an individual's integrity;
- I have had my professional licence restricted or suspended by a professional regulatory body, or are found by a professional regulatory body to have

committed professional misconduct or to be incompetent within the meaning of the statute under which the body made its finding.

Section 6: Professional Liability Insurance

Please select one of the following and provide the required information:

- a. On the effective date of my licence, I will have professional liability insurance that complies with CPATA's requirements.

Name of Insurer: _____ Policy Number (Optional): _____

- b. My employer holds professional liability insurance that covers my practice and that complies:

Name of Insurer: _____ Policy Number (Optional): _____

- c. I am exempt from holding professional liability insurance because I am employed by an employer that carries on business in Canada and who provides patent agent or trademark agent services solely to their employer and not to the public.

Section 7: Fees

The fee to apply to the Registrar to change from a Class 2 Licence or Class 4 Licence to a Class 1 Licence is \$153 plus applicable taxes. Please complete the payment authorization at the end of the form.

Before the Registrar issues the licence, the licensee must pay to the College the fee set out in item 10 or 11 of Schedule 1, prorated to the number of months remaining in the year following the month in which the licence is issued.

If applying between January 1 – March 31: You will be invoiced the class 2 or 4 annual fee, prorated to the number of months before the class 1 licence is issued, including the month it is issued. The pro-rated class 1 annual fee for the remainder of the year will be invoiced at the same time. The fees will be payable through the Licensee Portal.

Section 8: Signature

The signature can be provided in ink or by inserting a secure electronic signature into the space below.

Signature _____

Date _____

Any information with respect to this application will be collected, used or disclosed in accordance with the CPATA's Privacy Statement.

Payment Authorization:

Amount: \$153 + applicable taxes (List of tax rates is below).

Credit Card:

Type: Visa Mastercard AMEX

Card #:

Card Validation Code (CVC): Expiry Date:

Name on Card:

Signature of Cardholder:

Authorized Amount \$ (including tax):

Once processed this information will be deleted by CPATA

Electronic Funds Transfer:

Please email payments to payments.paiements@cpata-cabamc.ca and provide your name and "Change to Class 1" in the comments box.

Tax Rates:

Please select the tax rate based on the province associated with your business address.

Province	Tax Rate (%)	Province	Tax Rate (%)
British Columbia	0.05	Nova Scotia	0.15
New Brunswick	0.15	Nunavut	0.05
Manitoba	0.05	Ontario	0.13
Alberta	0.05	Quebec (HST ONLY)	0.05
Newfoundland and Labrador	0.15	Saskatchewan	0.05
Prince Edward Island	0.15	Yukon	0.05
Northwest Territories	0.05		