

Application Form
for the DVD6C Joint Patent License Program

Date:

(Please fill in the all necessary items and return it to the above.)

1. Name and Address of the company that will enter into the License Agreement

Company Name: Address:

2. Name and Title of the Person who will sign the License Agreement

Name: Title:

3. Name, Title, Division, Address, Telephone Number, Facsimile Number, and E-Mail Address of the Person to whom we can contact for this matter

Name: Title: Division: Address: Phone: Fax: E-Mail:

4. Category(ies) of DVD Products to be licensed

(Please mark Category(ies) that your Company would like to be licensed. e x.)

<u>Licensee Selection</u>	<u>Product Category</u>
<input type="checkbox"/>	DVD-Video Players
<input type="checkbox"/>	DVD-Audio Players
<input type="checkbox"/>	DVD-ROM Drives
<input type="checkbox"/>	DVD-ROM Discs
<input type="checkbox"/>	DVD-Video Discs
<input type="checkbox"/>	DVD-Audio Discs
<input type="checkbox"/>	DVD Decoders
<input type="checkbox"/>	DVD Video Recorders
<input type="checkbox"/>	DVD (Recordable Disc) Drives
<input type="checkbox"/>	DVD Encoders
<input type="checkbox"/>	DVD-R Discs
<input type="checkbox"/>	DVD-RW Discs
<input type="checkbox"/>	DVD-RAM Discs
<input type="checkbox"/>	DVD Recordable Disc Cases
<input type="checkbox"/>	+R Discs
<input type="checkbox"/>	+RW Discs

5. [New licensees only] Information about production/sale of DVD Products

(If your company already started manufacturing/selling DVD Products, please provide the information on the DVD Products.)

<p>(1) Product Category(ies)</p> <p>(2) Starting date of production/sale of the DVD Products</p> <p>(3) Country(ies) where the DVD Products are being manufactured or sold</p> <p>(4) Volume of the DVD Products ever manufactured/sold</p>
