

**Application Form**  
**for the DVD6C Joint Patent License**

Date:

To: Contact Address

(Please fill in this application form and send it to the above Contact Address)

**1. Company Name and Address**

(Please write your company name and address)

Company Name: Address:  (State of Incorporation):
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**2. Signer**

(Please write the name and title of a person who will sign the DVD6C Patent License Agreement)

Name: Title:
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**3. Contact Person**

(Please write the following information on a person to whom DVD6C can contact with reference to the DVD6C Patent License Agreement)

Name: Title: Division:  Address:  Phone: Fax: E-Mail:
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#### 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. Information on DVD Products

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

<p>(1) DVD Product Category(ies)</p> <p>(2) Starting date of manufacture/sale</p> <p>(3) Country(ies) of manufacture/sale</p> <p>(4) Volume of manufacture/sale to date</p>
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