



Office of the Controller General of Patents, Designs & Trade Marks
Department of Industrial Policy & Promotion,
Ministry of Commerce & Industry,
Government of India

(<http://ipindia.nic.in/index.htm>)



(<http://ipindia.nic.in/index.htm>)

Application Details

APPLICATION NUMBER	201611032463
APPLICATION TYPE	ORDINARY APPLICATION
DATE OF FILING	22/09/2016
APPLICANT NAME	1 . Tulshi Chakraborty 2 . Vipin Saini
TITLE OF INVENTION	ESTIMATION KIT FOR SIMULTANEOUS ESTIMATION OF THREE COMBINED PURE DRUGS NOVEL FORMULATION BY UV SPECTROPHOTOMETER
FIELD OF INVENTION	CHEMICAL
E-MAIL (As Per Record)	ashish.iprindia@hotmail.com
ADDITIONAL-EMAIL (As Per Record)	
E-MAIL (UPDATED Online)	ashish.iprindia@hotmail.com
PRIORITY DATE	
REQUEST FOR EXAMINATION DATE	07/06/2021
PUBLICATION DATE (U/S 11A)	23/03/2018
REPLY TO FER DATE	03/01/2022

Application Status

APPLICATION STATUS	Application in Hearing
--------------------	-------------------------------

FORM 18

THE PATENT ACT, 1970
(39 of 1970)
&
THE PATENTS RULES, 2003

REQUEST/EXPRESS REQUEST FOR EXAMINATION OF APPLICATION FOR PATENT

[See section 11B and rules 20(4) (ii),24B (1) (i)]

1. APPLICANT(S)/OTHER INTERESTED PERSON(S):

(a) Name :1. Tulshi Chakraborty

2. Vipin Saini

(b) Nationality :1 .India

2 .India

(c) Address :1 .MM College of Pharmacy, Maharishi Markandeshwar University, Mullana, Ambala (Haryana)-133207

2 .MM College of Pharmacy, Maharishi Markandeshwar University, Mullana, Ambala (Haryana)-133207

(d) Date Of Publication Under Section 11A :23/03/2018 00:00:00

2. STATEMENT IN CASE OF REQUEST FOR EXAMINATION MADE BY THE APPLICANT(S)

We Tulshi Chakraborty , Vipin Saini hereby request that our application for patent invention number 201611032463 filed on 22 Sep 2016 for the titled **ESTIMATION KIT FOR SIMULTANEOUS ESTIMATION OF THREE COMBINED PURE DRUGS NOVEL FORMULATION BY UV SPECTROPHOTOMETER** shall be examined under section 12 and 13 of the Act.

4. ADDRESS FOR SERVICE

M/S. IP NATION; D-101, SHYAM PARK EXT., SAHIBABAD, GHAZIABAD 201005,U.P.

Dated this(Final Payment Date):-----

Signature

Name of the Signatory

To,
The Controller of Patents,
The Patent Office
At New Delhi

This form is electronically generated.