



香港特別行政區政府知識產權署  
The Government of the Hong Kong Special Administrative Region  
Intellectual Property Department

For official use

## Patents Form OP3

### Request to review

Patents Ordinance (Cap. 514)  
Patents (General) Rules (Cap. 514C)

#### Important notes

##### 1. General notes:

- a. Please complete this form in English unless otherwise stated.
- b. By submitting this form, you will be treated as having given consent to the Patents Registry and its service provider to copy or communicate all the information provided to any third party (in or outside Hong Kong, China) who assists or supports the Patents Registry in performing its functions under the Patents Ordinance, Cap. 514 and its subsidiary legislation.
- c. This form must be signed and dated.
- d. If there is not enough space for any part on this form, please continue on an additional sheet. Number each additional sheet and state the number of additional sheet(s).
- e. Please enquire through the following means:
  - E-mail: [enquiry@ipd.gov.hk](mailto:enquiry@ipd.gov.hk)
  - Internet homepage address: [www.ipd.gov.hk](http://www.ipd.gov.hk)

##### 2. Use of personal data:

- a. Personal data provided in this form and any supporting document will be used by the Registrar of Patents ("the Registrar") for the "Purposes of Collection" set out in the Personal Information Collection Statement ("the PICS") at <https://www.ipd.gov.hk/en/privacy-policy-statement/personal-information-collection-statement/index.html>.
- b. In particular, **YOU SHOULD BE AWARE THAT** personal data collected by the Registrar may, in full or part, be—
  - (i) **made available online for public access and inspection;** and
  - (ii) **published or disclosed to the "Classes of Transferees" in or outside Hong Kong, China as set out in the PICS,** including but not limited to the World Intellectual Property Organization and other intellectual property authorities/institutions/organizations **which may subsequently make the relevant data available online for public access and inspection.**
- c. **DO NOT** include in this form and any supporting document any irrelevant or unnecessary personal data (whether yours or others).

##### 3. Use of other information:

- a. Other information, including those information relating to any business enterprise or entity, provided in this form and any supporting document will also be so used by the Registrar for the purposes as referred to in paragraph 2.a. above.
- b. Such information collected by the Registrar may, in full or part, also be so made available online, published or disclosed as set out in paragraph 2.b.(i) and (ii) above.
- c. **DO NOT** include in this form and any supporting document any information (whether yours or others) which is considered as confidential or commercially sensitive.

##### 4. Submission of application/request/notice:

In person or by mail with the appropriate fee to the Registrar of Patents, 24/F, Wu Chung House, No. 213 Queen's Road East, Wanchai, Hong Kong, China. The fee schedule can be viewed at <https://www.ipd.gov.hk/en/patents/forms-and-fees/index.html>. Payment can be made in person by cash, or by sending a cheque/bank draft (in Hong Kong dollars which can be cleared in Hong Kong, China) made payable to THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION.

\*Denotes mandatory fields

**01. Reference**

Filer's reference

**02. \*Application no./Patent no.**

Application no./Patent no.

This form is for one application/patent.

**03. \*Full name of the applicant(s) or proprietor(s)**

(a) Name in English

(b) Name in Chinese  
(if applicable)

**04. \*Document(s) filed with this form**

Document(s) filed with this form:

Please mark the appropriate box(es).

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**Representation to establish that the SP(O) application/short-term patent complies with the unfulfilled requirement**

Please state the total number of pages of representation attached with this form

☐

**Request to amend the SP(O) application/short-term patent to comply with the unfulfilled requirement**

(Request to amend the SP(O) application to be filed with Form P8.

Request to amend the short-term patent to be filed with Form OP7.)

**05. \*Address for service**

The address for service provided in this part shall be treated as being in substitution for any address for service previously filed.

All correspondence and/or document(s) will be sent to the address below.

**\*(a) Name**

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**\*(b) Address**

You must provide details of an address for service in Hong Kong, China. Please note that a P.O. Box, a "care of" address or an address used solely for mail forwarding is not acceptable.

Flat/Floor/Building

Street/District

**HONG KONG, CHINA**

**(c) Telephone no.**

In Hong Kong, China

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**(d) Fax no.**

In Hong Kong, China

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**06. Agent's details**

Go to Part 07 if you are NOT an agent.

If you have been duly authorized to act as an agent, please complete this part. The details provided in this part shall be treated as being in substitution for any agent's details previously filed.

**(a) Name**

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**(b) Address**

As an agent, you must provide the address of the premises in Hong Kong, China where you reside or carry on your business activities. Please note that a P.O. Box, a "care of" address or an address used solely for mail forwarding is not acceptable.

Flat/Floor/Building

Street/District

**HONG KONG, CHINA**

**07. \*Declaration/Signature**

**Warning: It is an offence in law to furnish any false statement/information or make a false declaration in this form.**

*(If you are signing this form in the capacity of an agent) I/We declare that:*

**I/We have been duly authorized to act as an agent as stated in Part 06.**

**I/We reside or carry on business activities on the premises at the address in Hong Kong, China as specified in Part 06.**

**I/We confirm that I/we have read and understood the “Important notes” of this form.**

**\*(a) Authorized signature**

**\*(b) Name of signatory**

**\*(c) Official capacity of signatory**

Examples: Authorized person,  
Director, Partner or Principal Officer of  
Applicant(s)/Proprietor(s)/Agent;  
Applicant(s)/Proprietor in person

**\*(d) Date**

DD-MM-YYYY

**08. Attachment(s)**

**Total number of attachment(s)**