

THE CHARTERED INSTITUTE OF PATENT ATTORNEYS

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COMPLAINTS FORM.

N. B. Before completing this form, please read the booklet entitled "Rules of Professional Conduct Under By-law 14 and Guidelines Concerning the Observance of the Rules of Professional Conduct". If your complaint is about a Patent Agent acting as a Litigator please refer to the booklets entitled "Rules of Professional Conduct for Patent Agents holding and acting within the Scope of Litigation Rights Certificates (Special Rules of Professional Conduct)" and "Disciplinary Procedure in respect of Litigation Work (Special Disciplinary Procedure)"

1. PERSONAL DETAILS

Your title: (e.g Mr. Ms.)

Your surname or family name:

Your forename(s):

Your address:

Your telephone no.: (Work)

(Home)

2. REPRESENTATIVE

(If you are using a Representative to help you with your complaint, please give their details below, otherwise go to Section 3)

Title: (e.g. Mr. Ms.)

Representative's surname or family name:

Representative's forename(s):

Representative's address:

Representative's telephone No.:

3. PATENT AGENT/PRACTITIONER YOU ARE COMPLAINING ABOUT

Title: (e.g. Mr. Ms.)

Name of Agent/Practitioner

Name of Agent's/Practitioner's Firm

Firm's Address:

Firm's telephone No.

Have you used the Firm's Complaints Procedure? Yes/No

(If the answer is "Yes" please give details)

4. **YOUR COMPLAINT.**

Please set out below the details of your complaint. Continue on a separate sheet or sheets if necessary. Please attach copies of any documents, letters etc. which you consider relevant to your complaint, but if you have already sent these to the Institute Secretary, please do not send further copies.

5. **THE SOLUTION**

Please say what you think this should be. A Disciplinary Board cannot give legal advice nor take action if it considers the Agent/Practitioner to have been negligent. The Board can, for example, issue a reprimand or award compensation if it is found that there has been a breach of a Rule relating to Professional Conduct.

6. Your (Your Representative's) Signature _____

(date)_____

Please return this form when completed to:

The Secretary
The Chartered Institute of Patent Attorneys
95 Chancery Lane
London WC2A 1DT