

In-State Product Licensing Application

This application should only be completed by those entities physically located in the State of Wyoming.

The purpose of this application is to obtain detailed information about your company and the product(s) you seek to produce under license so that the TLO may determine whether a license should be granted.

Please indicate the type of license you are applying for by checking the appropriate box below:

- Entrepreneur License (.01 - \$1,500 annual sales)
- Standard License (annual sales surpassing \$1,500, distributors, SI)

COMPANY INFORMATION

| | |
|---|--|
| Company Name: | |
| Company Also Known As: | |
| Physical Address: | |
| Mailing Address (if different): | |
| City, State, Zip | |
| Main Phone: | |
| Fax Number: | |
| Please enter the address of any online presence (i.e. website, Facebook, Etsy, etc.) | |

| Company Contacts | Name/Title | Email Address | Phone number |
|--|------------|---------------|--------------|
| Primary Contact: | | | |
| Royalty Reporting: <i>(royalty reports will be directed to this individual)</i> | | | |

Have you been previously licensed with our agency? Yes No

Type of organization: (check one)

- Corporation Partnership Limited Liability Company
- Sole Proprietorship Other: _____

Number of employees (FTE): _____

Identify licenses held by your company (Disney, University of..., MLB, etc.):

Company Function:

Retailer
 Manufacturer
 Distributor/Wholesaler
 Ad Specialty
 Artist/Crafter

PRODUCT AND MANUFACTURING INFORMATION

Please provide information about the products to which you wish to apply licensed marks

| Product Description <i>(e.g. t-shirts, drinkware)</i> | Method of Logo Application <i>(screenprint, engraving, etc.)</i> | Anticipated Selling Price | Distribution Channel |
|--|---|---------------------------|----------------------|
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Please specifically identify those items listed above that will be marketed for use by children with an asterisk.

*If you are producing items that will require commercial liability insurance, please do not purchase this insurance until your application has been approved and a licensing agreement has been executed.

I have read and understood this application and hereby state that to the best of my knowledge all information provided is accurate and complete.

Name: _____ Title: _____ Date: _____

Save this form and then manually attach it to an email addressed to trademrk@uwyo.edu.

Application materials may also be returned through the USPS at the address shown on page 1. Packages sent via UPS or FedEx should contain the following address: UW Trademark Licensing, Dept. 3322 1000 E. University Ave, Laramie, WY 82071.

| | | | | |
|----------------------|-----------------------------|-----------------|----------------------------|-----------------------|
| TLO Use Only: | | | | |
| App rec'd: _____ | Contract sent to Lic: _____ | Activate: _____ | Artwork sent to Lic: _____ | Quality sample: _____ |