## ETHIOPIAN INVESTMENT COMMISSION APPLICATION FORM FOR TECHNOLOGY TRANSFER AGREEMENT REGISTRATION

I.	THE APPLICANT (TECHNOLOGY RECIPIENT)	
	• Name:	
	Nationality:	
	Address:	
	Region/City	
	Woreda/Subcity	
	Kebele House#	
	Tel Fax	
	P.O.Box E-Mail	
II.	THE TECHNOLOGY SUPPLIER	
	• Name:	
	Nationality:	
	Address of registered Office	
	House No Street	_
	City Country	_
	Tel E-Mail	
	Main Business Activity	
III.	THE TECHNOLOGY TRANSFER AGREEMENT	
	Title of the Agreement	
	Description of the Agreement	
	- <del></del>	
	Date of the Agreement	
	Duration of the Agreement	
IV.	LOCAL ENTERPRISE /PROJECT RELATED TO THE AGREEMENT	
	Enterprise /Project Title	
	Location	_

## **DECLARATION AND SIGNATURE OF THE APPLICANT** I hereby declare that all the information provided are true and correct. Name of applicant \_\_\_\_\_ Designation \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_ FOR OFFICE USE ONLY Remarks \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_

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