



ETHIOPIAN INVESTMENT COMMISSION

Application Form for Technology Transfer Agreement Registration

I. The Applicant (Technology Recipient)

- Name: _____
- Nationality: _____
- Address :- Region/City _____ Woreda/Sub-city _____
Kebele _____ House No. _____ Tel. _____
P.O.Box _____ Fax _____ E-Mail _____

II. The Technology Supplier

- Name|: _____
- Nationality: _____
- Address or Registered Office _____
(Country, City Street No. House No.< Tel No.)
E-Mail: _____
- Main Business Activity: _____

III. The Technology Transfer Agreement

- Title of the Agreement: _____
- Description of the Agreement : _____

- Date of the Agreement _____ Duration of the Agreement _____

IV. Local Enterprise/Project Related To The Agreement

- Enterprise /project Title _____
- Relevance of the Agreement to the Project: _____

- Location _____

V. 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 _____

Name _____ Position _____

Signature _____ Date _____