

INSTRUCTIONS FOR COMPLETING THE PATENT ELECTRONIC SYSTEM VERIFICATION FORM

The completed form should be mailed to:

Mail Stop EBC
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Block 1 -Requestor Status

Only Registered Patent Attorneys and Patent Agents should enter a check mark or an “X” in the “Registered Practitioner” box and enter their USPTO registration number in the box provided.

Only Limited Recognition Practitioners should enter a check mark or an “X” in the “Limited Recognition Practitioner” box and enter their USPTO registration number in the box provided.

Only Independent Inventors should enter a check mark or an “X” in the “Pro Se Inventor” box and enter a USPTO generated customer number** in the customer number section.

Practitioner support users who support practitioners should not fill out this form to obtain a registered USPTO.gov account. Practitioner support users will obtain registered status once they create a USPTO.gov account and become sponsored by a practitioner.

Enter additional customer numbers on a separate sheet of paper.

**To obtain a USPTO generated customer number, please fill out the Customer Number form found at <https://www.uspto.gov/sites/default/files/documents/sb0125.pdf>. The Request for Customer Number can be sent simultaneously with the Patent Electronic Verification Form.

Block 2 -Name and Address

- (1) Applicant must provide his or her complete legal name, including first name, middle name (not initial) and last name. Complete legal names must be provided to avoid confusion between people having the same first name, middle initial and last name.
- (2) Applicant provides his or her name exactly as it appears on valid, current government-issued photo identification, such as a driver’s license, passport, or resident alien card. The same valid government identification must be presented for notarization to the notary. Refer to the Identity Proofs section at the bottom of this document for example government identification types.
- (3) The name entered on the USPTO.gov account must match the name entered on the form.

- (4) For registered practitioners or practitioners granted limited recognition, the name provided must correspond to Office of Enrollment and Discipline records.

First (Given) Name - The first/given name of an individual (suggested 50 characters maximum).

Middle Name – The middle name or initial of an individual as understood in the United States (suggested 50 characters maximum).

Last (Family) Name – The last/family name of an individual (suggested 50 characters maximum).

Street Address – The street name, number, and any additional components (directional symbols, etc.) necessary to identify a specific address (suggested 100 characters maximum).

City – The name of a city associated with the address (suggested 40 characters maximum).

State – The abbreviation for each state of the United States.

Zip – In the United States this equates to zip code (suggested 20 characters maximum).

Country – The complete English language name of a nation.

Telephone Number – Please include the country code if outside the United States and area code for domestic US and Canada (suggested 40 characters maximum).

USPTO.gov Email Address – An individual's email address for electronic communications and profile information as indicated in MyUSPTO.gov (maximum 129 characters).

Block 3 – Type of Action Requested

The requester should select a type of request (account creation, account recovery, name change, account association, account revocation or other) by checking the appropriate box.

Request a new Patent Electronic System account – In checking this box you are requesting an account be issued for your use in doing business with the United States Patent and Trademark Office (USPTO). The account enables the USPTO to identify your electronic communications and to provide encrypted communication. This selection is appropriate if you have never held a Patent Electronic System account.

Update Patent Electronic System account – In checking this box you are requesting to update the email address associated to your current Patent Electronic System account with the new email address listed in Block 2. You will need to enter the previous email address in the "Previous email address" line.

This is a name change – In checking this box you are requesting the name associated to the Patent Electronic System account to be updated. The new name will be listed in Block 2 and the previous name will be entered next to the "Previous Name" line.

Associate current Patent Electronic System account with the customer numbers detailed in Block 1 – In checking this box you are requesting to associate the current Patent Electronic System account with the customer numbers detailed in Block 1.

Revoke current Patent Electronic System account – In checking this box you are requesting that the USPTO revoke your Patent Electronic System account. This will make it unusable for new communication with the USPTO.

Typical reasons for requesting revocation are:

- (1) You are a practitioner but you have mistakenly set-up your current USPTO.gov account as a Practitioner Support user (sponsored by another practitioner) and you wish to use this email address as your Registered Practitioner account. Indicate in the “Other” field to re-use the email address as a registered practitioner.
- (2) A new account has been issued to you
- (3) You no longer wish to have an account
- (4) Your legal name has changed
- (5) You have lost control of your account and the account has become compromised. If you desire a replacement account please complete the Update Patent Electronic System account section.

Other – Describe in Detail – In checking this box you will provide the details in the field provided.

Block 4 – Signature

The requester will need to provide a wet signature and date of the request. This signature indicates that you have read and understand the Subscribers Agreement and will abide by the rules and policies of the agreement.

Block 5 – Identification of Patent Electronic System Requestor

All requesters **must** have their signature notarized by a valid (non-expired) notary. You need to present to the notary two forms of acceptable identification and have your signature notarized.

Identity Proofs:

To be sure of the identity of the person requesting the USPTO Patent Electronic System account, the Notary or USPTO Official completing the USPTO Patent Electronic System Verification Form must see two (2) forms of identification at least one of which is a picture ID. Acceptable forms of ID are:

LIST A DOCUMENTS THAT ESTABLISH <u>BOTH</u> IDENTITY AND EMPLOYMENT AUTHORIZATION	LIST B DOCUMENTS THAT ESTABLISH IDENTITY	LIST C DOCUMENTS THAT ESTABLISH EMPLOYMENT AUTHORIZATION
1. U.S. Passport or U.S. Passport Card	1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)	2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa	3. School ID card with a photograph	3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
4. Employment Authorization Document that contains a photograph (Form I-	4. Voter's registration card	4. Native American tribal document
5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the	5. U.S. Military card or draft record	5. U.S. Citizen ID Card (Form I-197)

6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	6. Military dependent's ID card	6. Identification Card for Use of Resident Citizen in the United States (Form I-179)
	7. U.S. Coast Guard Merchant Mariner Card	
	8. Native American tribal document	
	9. Driver's license issued by a Canadian government authority	

SOCIAL SECURITY CARDS ARE NOT ACCEPTABLE AS IDENTIFICATION.