

# INVENTION DISCLOSURE FORM



## PERSONAL INFORMATION:

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**Your Name:**

**Address:**

**Postcode:**

**Telephone:**

**Mobile:**

**Email:**

## INFORMATION RELATING TO BACKGROUND OF INVENTION:

e.g. Products/processes that already exist

## PROBLEMS:

Problems associated with the previous type of products/processes which your invention solves

**DESCRIPTION:**

A brief description of the key aspects, components and/or method steps of your invention

**LIST ALL THE ADVANTAGES OF YOUR INVENTION:**

Information as to why your invention is cheaper, better, faster etc than existing devices

**WHEN COMPLETE PLEASE SEND OR FAX THIS FORM TO:**

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Fax number: 0870 112 1803

[www.ipconsult.co.uk](http://www.ipconsult.co.uk)