

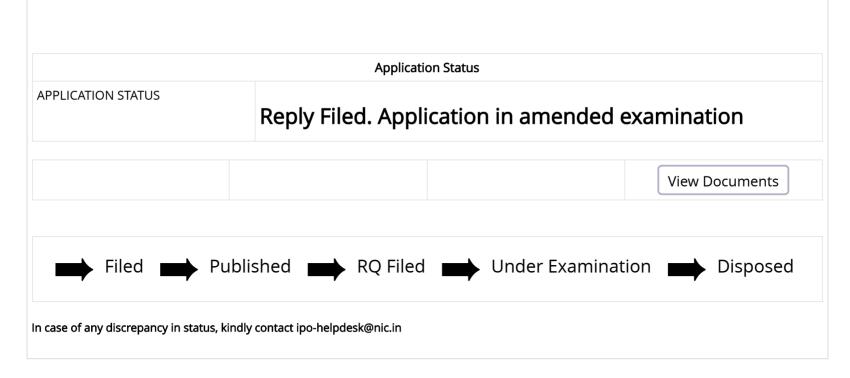
Office of the Controller General of Patents, Designs & Trade Marks Department of Industrial Policy & Promotion, Ministry of Commerce & Industry, Government of India

## (http://ipindia.nic.in/index.htm)



(http://ipindia.nic.in/index.htm)

Application Details					
APPLICATION NUMBER	202241043771				
APPLICATION TYPE	ORDINARY APPLICATION				
DATE OF FILING	30/07/2022				
APPLICANT NAME	<ol> <li>Aditya Engineering College</li> <li>Aditya College of Engineering and Technology</li> <li>Aditya College of Pharmacy</li> <li>Aditya Pharmacy College</li> <li>Aditya College of Engineering</li> </ol>				
TITLE OF INVENTION	Wearable Device and Method for Treatment of Plantar Fascia				
FIELD OF INVENTION	BIO-MEDICAL ENGINEERING				
E-MAIL (As Per Record)	hima@novelpatent.com				
ADDITIONAL-EMAIL (As Per Record)	murali@novelpatent.com				
E-MAIL (UPDATED Online)					
PRIORITY DATE					
REQUEST FOR EXAMINATION DATE	10/08/2022				
PUBLICATION DATE (U/S 11A)	05/08/2022				
REPLY TO FER DATE	01/03/2023				



"FORM 1				(FOR OFFIC	E USE ONLY)
THE PATENT	S ACT 1970 (39	of 1970) and			
THE PATENT	S RULES, 2003				
APPLICATIO	N FOR GRANT	OF PATENT			
(See section	7, 54 and 135 a	and sub-rule (	1) of rule 20)		
			Application		
			Filing date:	6 1	
			Amount		
2			CBR No:		
		1	Signature:		
1. APPLICAI	NT'S REFERENCE	Ε/			
IDENTIFICA	TION NO. (AS A	LLOTTED BY			
OFFICE)					
2. TYPE OF	APPLICATION [P	Please tick (√	) at the approp	riate category]	
Ordinary (	( )	Convention	( )	PCT-NP (	
				T CT IVI (	
Divisional	Patent of	Divisional	Patent of	Divisional	Patent of Addition ( )
( )	Addition ( )	( )	Addition ( )	( )	
3A. APPLIC	ANT(S)				
Name in F	ull	Nationality	Country of	Address of th	ne Applicant
			Residence		
		* F &		House No.	ADB Road
				Street	Aditya Nagar, Surampalem
Aditya Engin	eering College	INDIAN	INDIA	City	East Godavari
ranga Engin	coming confege	INDIAIN	INDIA	State	Andhra Pradesh
				Country	India
			×	Pin code	533437
		×		House No.	ADB Road
				Street	Aditya Nagar, Surampalem
	College of	INDIAN	INDIA	City	East Godavari
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				Country	India
				Pin code	533437

			House No.	ADB Road
			Street	Aditya Nagar, Surampalen
Aditya College of Pharmacy	INDIAN	INDIA	City	East Godavari
Autiya Conege of Finantiacy	INDIAN	INDIA	State	Andhra Pradesh
			Country	India
			Pin code	533437
			House No.	ADB Road
	,		Street	Aditya Nagar, Surampalem
Aditya Pharmacy College	INDIAN	INDIA	City	East Godavari
Autya i narmacy Conege	INDIAN	INDIA	State	Andhra Pradesh
			Country	India
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		a	House No.	ADB Road
	INDIAN	DIDIA	Street	Aditya Nagar, Surampalen
Aditya College of			City	East Godavari
Engineering		INDIA	State	Andhra Pradesh
	8		Country	India
			Pin code	533437
3B. CATEGORY OF APPLICA	NT [Please tic	k (✓) at the ap	propriate cate	gory]
Natural Person ( )	Other th	an Natural Perso	n	
	Small Entity (	)Startup ( ) C	Others ( ) Educ	cational Institute ( ✓)
4. INVENTOR(S) [Please tid	∟ ck (✓) at the a	appropriate cate	gory]	
Are all the inventor(s)	Yes ( )		No ( ✓	)
same as the applicant(s) named above?	, ,			7
If "No", furnish the details	of the invento	r(s)		
Name in Full	Nationality	Country of Residence	Address o	f the Inventor

			House No.	Dean (Examinations), Department of EEE
Jonnalagadda Pavan	INDIAN	INDIA	Street	Aditya Engineering College, ADB Road, Aditya Nagar, Surampalem
o samuru guru u Tu Tu Tu		поп	City	East Godavari
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Vella Satyanarayana	INDIAN	INDIA	City	East Godavari
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			House No.	Assistant Professor, Department of ECE
T. Anjaiah	INDIAN	INDIA	Street	Aditya College of Engineering and Technology, ADB Road, Aditya Nagar, Surampalem
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			House No.	Associate Professor, Department of Phar Tech
K. Venkateswarlu	INDIAN	INDIA	Street	Aditya College of Pharmacy, ADB Road, Aditya Nagar, Surampalem
- Tomacos warra	INDIAN	INDIA	City	East Godavari
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	T .		Country	India
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			House No.	Associate Professor, Department of Phar Tech
			Street	Aditya Pharmacy College, ADB Road, Aditya Nagar, Surampalem
T. Uday Kumar	INDIAN	INDIA	City	East Godavari
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	) 		House No.	Associate Professor, Department of CSE
	INDIA	Street	Aditya College of Engineering, ADB Road, Aditya Nagar, Surampalem	
V. Chandra Sekhara Rao	V. Chandra Sekhara Rao INDIAN		City	East Godavari
			State	Andhra Pradesh
			Country	India
			Pin code	533437
5. TITLE OF THE INVENTION				
Wearable D	evice and Metho	d for Trea	atment of Plant	ar Fascia
6. AUTHORISED REGISTERED	PATENT	IN/PA		3925
AGENT(S)		Name	Н	ima Bindu Atti
		Mobile	+9	01 9000111656
7. ADDRESS FOR SERVICE O	ODRESS FOR SERVICE OF APPLICANT IN		2. Aditya ( Technolo 3. Aditya ( 4. Aditya P	Engineering College College of Engineering and ogy College of Pharmacy Pharmacy College College of Engineering
	Postal Address	Plot # 4 Opp. IIM-Vi Anandapuram	rent Services Pvt. Ltd. 7, Sai Priya Layout, zag Road, Gambheeram, , Visakhapatnam-531163, ra Pradesh, India.	

				Telep	ho	
				Mob	ile	+91 9000111656
- 100				Fax N	10.	
				E-ma	il	hima@novelpatent.com
8. IN C	ASE OF APP	LICATION CLA	IMING PR	ORITY	OF	APPLICATION FILED IN CONVENTION
COUNT	RY, PARTICUL	ARS OF CONV	ENTION AP	PLICA <sup>*</sup>	LIOI	N
Country	Application	Filing date	Name of t	ne	Т	IPC (as classified in the convention
	Number		applicant		i	country)
						N, PARTICULARS OF INTERNATIONAL
APPLICA	ATION FILED L	JNDER PATEN	T CO-OPER	ATION	TRI	EATY (PCT)
International application number			International filing date			
				20		
10. IN	CASE OF DI	VISIONAL AI	PPLICATION	FILE	) U	NDER SECTION 16, PARTICULARS OF
ORIGIN	AL (FIRST) AP	PLICATION				
Origin	al (first) applic	ation No.		Date	of f	iling of original (first) application
			ITION FILE	D UN	DER	SECTION 54, PARTICULARS OF MAIN
APPLICA	ATION OR PAT	ENT				
Main	application/pa	tent No.		Date	of f	iling of main application
12. DEC	LARATIONS					

## (i) Declaration by the inventor(s)

(In case the applicant is an assignee: the inventor(s) may sign herein below or the applicant may upload the assignment or enclose the assignment with this application for patent or send the assignment by post/electronic transmission duly authenticated within the prescribed period).

We, the above named inventors are our true & first inventor(s) for this Invention and declare that the applicant herein are our assignee or legal representative.

Date: 28-07-2022

(1) Signature: Source
Name: Jonnalagadda Pavan

(2) Signature: Swamarayana
Name: Vella Satyanarayana

(3) Signature: The

Name: T. Anjaiah

(4) Signature: K Culculemb

Name: K. Venkateswarlu

(5) Signature: T. Edeya Camard

Name: T. Uday Kumar

(6) Signature:

Name: V. Chandra Sekhara Rao

## (ii) Declaration by the applicant(s) in the convention country

(In case the applicant in India is different than the applicant in the convention country: the applicant in the convention country may sign herein below or applicant in India may upload the assignment from the applicant in the convention country or enclose the said assignment with this application for patent or send the assignment by post/electronic transmission duly authenticated within the prescribed period)

We, the applicant(s) in the convention country declare that the applicant(s) herein is/are my/our assignee or legal representative.

(iii) Dec	aration b	y the app	olicant(s)							
I/We the	e applicar	nt(s) here	by declare(s)	that:	-					
	I am in	possessio	n of the abov	e-me	entioned in	venti	on.			
	The co		specification	rel	lating to	the	invention is	filed w	ith	this
	and the	necessa	ry permission	fror	n the com		the biological r t authority sha			
			e grant of pate							
			il ground of ol irst inventor.	bject	ion(s) to th	ie grai	nt of the Patent	to me/us.		
	I am the	e assigne	e or legal repr	esen	tative of tr	ue & f	irst inventor.			
	The ap	plication	or each of	the	application	ns, pa	articulars of w	hich are	giver	ı in
	Paragra		s the first app				n country/cour			
	I/We cla	aim the p	riority from t	he at	ove ment	ioned	application(s)	filed in cor	ven	tion
							for protection			
	inventio	n had be	en made in a which I/We d	con	vention co	untry	before that da	te by me/	us or	by
			ion in India ty (PCT) as m				tional applicat h-9.	ion under	Pate	ent
						-	on particulars o	f which is	give	n in
	Paragra	ph-10 and	d pray that thi YYYY under se	is app	olication m	ay be	treated as dee	med to ha	ve b	een
No. 2							ation of the inv	ontion nor	.+:	
			n in Paragraph			ounc	ation of the my	ention par	ticui	ars
13. FOLLO	VING AR	E THE AT	TACHMENTS \	MITH	THE ADDI	ICATIO	ON			
(a) Form 2					IIIL ALLE	ICAIN	JIV.			4 ]
Item		Details		-	Fee	***************************************	Rema	rks		
Complete/	regis h	No. of p	ages				Keilla	11.5		

Item	Details	Fee	Remarks	
Complete/ provisional specification)	No. of pages			
No. of Claim(s)	No. of claims and No. of pages			
Abstract	No. of pages			
No. of Drawing(s)	No. of drawings and No. of pages			

- # In case of a complete specification, if the applicant desires to adopt the drawings filed with his provisional specification as the drawings or part of the drawings for the complete specification under rule 13(4), the number of such pages filed with the provisional specification are required to be mentioned here.
- (b) Complete specification (in conformation with the international application)/as amended before the International Preliminary Examination Authority (IPEA), as applicable (2 copies).
- (c) Sequence listing in electronic form
- (d) Drawings (in conformation with the international application)/as amended before the International Preliminary Examination Authority (IPEA), as applicable (2 copies).
- (e) Priority document(s) or a request to retrieve the priority document(s) from DAS (Digital Access Service) if the applicant had already requested the office of first filing to make the priority document(s) available to DAS.
- (f) Translation of priority document/Specification/International Search Report/International Preliminary Report on Patentability.
- (g) Statement and Undertaking on Form 3
- (h) Declaration of Inventorship on Form 5
- (i) Power of Authority

I/We hereby declare that to the best of my/our knowledge, information and belief the fact and matters slated herein are correct and I/We request that a patent may be granted to me/us for the said invention.

Dated this 28<sup>th</sup> day of July, 2022

Signature: Simple

Name: Hima Bindu Atti

To,

The Controller of Patents

The Patent Office, at Chennai

Note: -

- \* Repeat boxes in case of more than one entry.
- \* To be signed by the applicant(s) or by authorized registered patent agent otherwise where mentioned.
- \* Tick ( $\checkmark$ )/cross (x) whichever is applicable/not applicable in declaration in paragraph-12.
- \* Name of the inventor and applicant should be given in full, family name in the beginning.
- \* Strike out the portion which is/are not applicable.
- \* For fee: See First Schedule";