

COMPETITION AUTHORITY OF KENYA
APPLICATION FOR EXEMPTION – CAK. 3
(Exemption in respect of Intellectual Property Rights)

To: The Competition Authority

From:

1. Name of Applicant

2. We apply in terms of section 28 of the Competition Act for an exemption from the application of Part IIIA of the Act for: -----

3. We seek an exemption for a period of _____ (duration).

4. In respect of this matter, has previous exemption been:

Granted? Yes No

Refused? Yes No

5. If you answered “yes” to either question above, please provide the case number for the previous exemption application _____

6. Name and Title of Person authorized to sign:

Authorized Signature:

Date:

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7. The following information must be included in your description of the agreement or practice for which you seek an exemption

1. Your address for service of documents
2. A short description of your business
3. A brief description of the practice or practices which you seek to have exempted and, if already in place, its date.
4. The names and addresses of other parties to that practice
5. A brief description of the intellectual property right exercised
6. The facts and contentions on which you rely.
7. The sections of the Act that you believe may be contravened by the practice or practices you have described
8. Description of the goods or services to which the proposed or actual restrictive practice relate
9. The sections of the Act that you believe may be contravened by the practice
10. Description of the market(s) in which the goods or services described in item 8 are supplied or acquired and other affected markets including: significant suppliers

and purchasers; substitutes available for the relevant goods or services; any restriction on the supply or acquisition of the relevant goods or services

11. Detriment to the public resulting or likely to result from the exemption, in particular the likely effect of the agreement on the prices of the goods or services

8. Further information

Name and address of person authorized by the applicant to provide additional information:

Dated.....

Signed by/on behalf of the applicant

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(Signature and official seal or stamp)

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(Full Name and Position in Organization)

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9. For official use only:

Authority file number:

Date filed:.....

Contact.....