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Product Description _____

Name _____

Home Address _____

Daytime Telephone _____ Email _____

Patent Issued Yes No If yes, include copy of the patent.

Patent Pending Yes No If yes, include a copy of the pending patent.

Name & Address of Current Employer

Name & Address of Employer at the time of idea was conceived or developed

If any current or previous employer has any rights in the submission, please explain.

Signature and Date

I warrant that I submit this idea unsolicited by Bon Tool Co., and that I have the unrestricted right to disclose and/or dispose of it to Bon Tool Co., and that I am of legal age and otherwise competent to enter into this agreement.

Date _____

Signature(s) of Submitters(s) _____

Printed Name(s) of Submitters(s) _____

Mail signed completed form along with necessary supporting materials to Bon Tool Co. Retain a copy for your records.

New Product Submissions
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