**APPLICATION FOR REIMBURSEMENT**

**UNDER REVISED ENHANCED MEDIATION PROMOTION SCHEME (REMPS)**

**Intellectual Property Office of Singapore**

**Hearings and Mediation Department**

1. **Details of Case(s) before IPOS**

|  |  |
| --- | --- |
| IPOS Case Number(s): |  |
| Name of Applicant for Reimbursement: |  |

1. **Details of Mediation**

|  |  |
| --- | --- |
| Start Date of Mediation Session: |  |
| End Date of Mediation Sesssion:[[1]](#footnote-2) |  |
| Mediation Service Provider: |  |
| Country of Mediation: Singapore |  |

1. **Conditions of Claim for Reimbursement (Annex D)**

|  |
| --- |
| 1. I agree to all the conditions in Annex D.
 |
| 1. I agree:
	1. to submit this application for reimbursement with all the requisite documentation, **except** the agent fees incurred after the mediation, **within 1 month** from the date of receipt issued by the mediation service provider or from the date of invoice and receipt (if any) issued by my lawyer / agent in relation to mediation-related agent fees, whichever is later;
	2. that IPOS can **proceed** with named publicity of the mediated case upon receipt of this application for reimbursement and all the relevant information referred to in (i) above; and
	3. to submit the final outstanding information on agent fees incurred after mediation, **within 1 month** of the close of IPOS proceedings by way of an updated application for reimbursement.
 |
| 1. I confirm that the subject matter of this mediation included foreign IP rights: Yes (namely in: ) / No.[[2]](#footnote-3)
 |
| 1. I understand that IPOS will only reimburse me up to 80% of my lawyer’s / agent’s fees relating to mediation (and mediation-related disbursements charged by my lawyer / agent).
 |
| 1. Lawyer / agent fees (if any):
 | I confirm that the available information has been provided in Annex A. |
| 1. Questionnaire :
 | I confirm that the questionnaire in Annex B has been completed.  |
| 1. I understand that IPOS will only reimburse me after receipt of the final outstanding information on agent fees incurred after mediation.
 |

1. **Documents and Payment Information for Reimbursement**

| **Fee** | **Billed amount** | **Documents** |
| --- | --- | --- |
| Mediation service provider’s fees and Mediator’s fees | $ | I confirm that the invoice and receipt issued by the mediation service provider are attached. |
| Mediation-related lawyer / agent fees (and mediation-related disbursements charged by lawyer / agent)  | $ | I confirm that the invoice and receipt (if any) issued by the lawyer / agent are attached.I confirm that:1. the invoice covers mediation-related fees and disbursements only; or
2. (if the invoice includes non-mediation related items) the invoice is itemised so that the costs for mediation-related fees are clear.
 |

|  |  |
| --- | --- |
| Payment Details Instruction to IPOS: | I confirm that the fields in Annex C have been completed. |

1. **Contact Details[[3]](#footnote-4)**

|  |  |
| --- | --- |
| Name & Designation: |  |
| Address: |  |
| Contact No.: |  |
| Email address: |  |

1. **Declaration and Signature**

|  |
| --- |
| By signing and submitting this application for reimbursement, I 1. declare that the above information furnished above is true to the best of my knowledge.
2. acknowledge that IPOS may:
3. ask for more information in order to be satisfied that all the conditions of the REMPS are met;
4. refuse to reimburse if any of the conditions of the REMPS is not met to any extent;
5. determine the circumstances in which the reimbursement may be pro-rated; and
6. seek repayment of any reimbursement which has been disbursed should any information provided as part of the conditions of the REMPS be inaccurate or incomplete to any extent.
 |
| Name of Person Signing this application for reimbursement:[[4]](#footnote-5)  |  |
| Designation of Person Signing this application for reimbursement: |  |
| Signature: |  |
| Date:  |  |

**Please submit this application for reimbursement to** **ipos\_hmd@ipos.gov.sg****.**

**Annex A**

**REVISED ENHANCED MEDIATION PROMOTION SCHEME (REMPS)**

**LAWYER / AGENT FEES DISCLOSURE (S$)[[5]](#footnote-6)**

|  |  |  |  |
| --- | --- | --- | --- |
| **S/N** | **Item (where applicable)** | **No. of hours** | **Total fee for each stage**[[6]](#footnote-7) |
|  |  |  | <$500 | $500-$999 | $1,000-$1,999 | $2,000-$2,999 | $3,000-$3,999 | $4,000-$4,999 | ≥$5,000 |
| 1 | Pre-action advice  |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 2 | Pleadings (Preparation) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 3 | Pleadings (Review) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 4 | Interlocutory hearing (Preparation) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 5 | Interlocutory hearing (Attendance) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 6 | Evidence (Preparation of Own Evidence) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 7 | Evidence (Review of Counterparty’s Evidence) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 8 | Full hearing (Preparation) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 9 | Full hearing (Attendance)  |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 10 | Taxation (Preparation)  |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 11 | Taxation (Attendance)  |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 12 | ***Mediation-related*** fees[[7]](#footnote-8) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| 13 | Miscellaneous[[8]](#footnote-9) |  |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
|  | **Total** |  | [ ]  <$5,000 [ ]  $5,000-$9,999 [ ]  $10,000-$14,999 [ ]  $15,000-$19,999[ ]  $20,000-$24,999 [ ]  $25,000-$29,999 [ ]  $30,000-$34,999 [ ]  ≥$35,000 |

Comments (if any):

**Annex B**

**REVISED ENHANCED MEDIATION PROMOTION SCHEME (REMPS)**

**QUESTIONNAIRE**

1. **Details of Mediation**

|  |  |
| --- | --- |
| Mediation Service Provider (Organisation): |  |
| Name of Mediator: |  |
| Either (i) Name of Co-mediator:[[9]](#footnote-10) |  |
| Or (ii) Name of Shadow Mediator:[[10]](#footnote-11) |  |
| Stage of Dispute when referred to Mediation: |  |

1. **Feedback**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PROCESS** | **Strongly Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly Disagree** |
| 1 | We are satisfied with the mediation process. |  |  |  |  |  |
| 2 | The mediation was effective in resolving the dispute. |  |  |  |  |  |
| 3 | We have used mediation before.  | Yes / No[[11]](#footnote-12) |
| 4 | We are likely to use mediation again. |  |  |  |  |  |
| 5 | We are likely to recommend mediation to others. |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MEDIATION SERVICE PROVIDER / MEDIATOR** | **Strongly Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly Disagree** |
| 6 | We are satisfied with the support provided by the mediation service provider. |  |  |  |  |  |
| 7 | We are satisfied with the mediator(s). |  |  |  |  |  |
| **OUTCOME** | **Yes, Fully** | **Partially** | **Not At All** |
| 8 | Our dispute was resolved at the mediation. |  |  |  |
| 9 | If the dispute was not fully resolved, please indicate the reasons. |  |  |  |
| **MOTIVATION FOR MEDIATION** |
| 10 | Is the availability of the funding a major factor for you to consider mediation? |  |
| 11 | How likely are you to use mediation again if there is no funding available? |  |
| 12 | What other reasons will encourage you to consider mediation for future disputes? |  |
| 13 | Please share any other comments, thoughts and/or suggestions. |  |

**Annex C**

**REVISED ENHANCED MEDIATION PROMOTION SCHEME (REMPS)**

**FORM ON INSTRUCTION TO IPOS ON PAYMENT OF CLAIM**

**1a) For Payment via GIRO**

**Interbank transfer details (Local Bank)**

Beneficiary name as per bank[[12]](#footnote-13):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Address :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Branch :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Branch Code :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Account Number :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1b) Contact Details (Notification of Payment)**

Contact Person :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*Upon approval, reimbursement will be credited to the interbank account within 30 days.*

**Annex D**

**REVISED ENHANCED MEDIATION PROMOTION SCHEME (REMPS)**

**CONDITIONS TO QUALIFY FOR FUNDING UNDER THE REMPS**

1. Parties have an existing dispute before IPOS which is the subject-matter of a mediation on or after 1 April 2022, in any event, no later than 31 March 2025 or until the overall fund is drawn down, whichever is earlier.
2. The mediation takes place in Singapore. This may include the use of video-conferencing to involve party representatives who are not able to be present in Singapore during the mediation, as long as the mediator is physically in Singapore during the mediation, and is a Singaporean or is based in Singapore.
3. Parties allow a “shadow” mediator appointed by IPOS from the Young IP Mediator Initiative (“YIPM”) to observe the mediation.[[13]](#footnote-14)
4. Parties disclose their lawyer / agent fees incurred from the start to the end of the IPOS proceedings.
5. Parties give feedback on their mediation experience.
6. Parties agree to named publicity*,* excluding details of the settlement terms (such as the quantum of the settlement). The purpose of the named publicity is to give concrete, relatable examples to other businesses and individuals and thus encourage them to consider mediation. The amount of detail in the publicity is not expected to disclose much more than the identity of the parties, the nature of their disputes, the countries spanned by their disputes, the duration of their disputes, the parties’ comments on the mediation process, any advice they have for others facing disputes etc.
7. Parties co-pay at least 20% of their lawyer / agent fees relating to mediation (and mediation-related disbursements charged by the party’s lawyer / agent).
1. If session takes more than 1 day. [↑](#footnote-ref-2)
2. Delete as appropriate. [↑](#footnote-ref-3)
3. Please provide a contact person with whom we can get in touch in relation to this application for reimbursement. [↑](#footnote-ref-4)
4. Please ensure that the person signing this application for reimbursement is in a position of authority in relation to the Applicant for Reimbursement. [↑](#footnote-ref-5)
5. Please note that **all items**, except for item 12, relate to **non-mediation related fees**. [↑](#footnote-ref-6)
6. Select a band as appropriate. [↑](#footnote-ref-7)
7. This refers to lawyer / agent fees relating to mediation. For example, lawyer’s / agent’s fees for representing the party at the mediation. [↑](#footnote-ref-8)
8. This refers to any other lawyer / agent fees which do not fall under the categories above. The fees disclosed in Annex A should **exclude** disbursements. [↑](#footnote-ref-9)
9. If this is not applicable, please indicate “NA”. [↑](#footnote-ref-10)
10. If this is not applicable, please indicate “NA”. [↑](#footnote-ref-11)
11. Please select “Yes” or “No”. [↑](#footnote-ref-12)
12. If this beneficiary is not the Applicant for Reimbursement, please provide a copy of the instructions or agreement from the Applicant for Reimbursement authorising payment to this beneficiary. [↑](#footnote-ref-13)
13. In the event the YIPM is an accredited mediator, the appointment of the YIPM as co-mediator will also satisfy this requirement of having a “shadow” mediator observing the mediation. [↑](#footnote-ref-14)