

Pharmaceutical Patent Licensing Agreement

Date: [Insert Date]

Licensor: [Insert Licensor Name]

Address: [Insert Licensor Address]

Contact Person: [Insert Contact Person]

Email: [Insert Email]

Phone: [Insert Phone Number]

Licensee: [Insert Licensee Name]

Address: [Insert Licensee Address]

Contact Person: [Insert Contact Person]

Email: [Insert Email]

Phone: [Insert Phone Number]

1. Grant of License

The Licensor hereby grants to the Licensee an exclusive, non-transferable license to use the following patents: [Insert Patents].

2. Performance Milestones

The Licensee agrees to meet the following performance milestones:

- Milestone 1: [Description of Milestone 1] - Deadline: [Insert Date]

- Milestone 2: [Description of Milestone 2] - Deadline: [Insert Date]

- Milestone 3: [Description of Milestone 3] - Deadline: [Insert Date]

3. Payment Terms

The Licensee shall pay the Licensor the following fees: [Insert Payment Details].

4. Confidentiality

Both parties agree to maintain the confidentiality of proprietary information as outlined in this agreement.

5. Term and Termination

This agreement shall commence on the effective date and continue for [Insert Duration] unless terminated as set forth herein.

6. Governing Law

This agreement shall be governed by the laws of [Insert Jurisdiction].

IN WITNESS WHEREOF, the parties hereto have executed this Pharmaceutical Patent Licensing Agreement as of the date first above written.

[Licensor Name]
Title: [Insert Title]

[Licensee Name]
Title: [Insert Title]