

NOTICE OF OPPOSITION AGAINST REGISTRATION OF A MARK

THE INTELLECTUAL PROPERTY LAW N° 31/2009 OF 26/10/2009
ARTICLE 146

I. Application

New Notice (Fill in all relevant fields)

II. Opposition

Application No.: □□□□□□□□□□

Name of the applicant:

First name:

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Middle name:

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Last name:

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Class- or classes (classes by the Nice classification):

Description of the ground(s) of opposition:

III. Applicant information (Please cross out the type of applicant and fill in the required information accordingly)

Natural person

Organization

ID document (ID card or passport):	<input type="text"/>
ID document number:	<input type="text"/>
Country:	<input type="text"/>
First name:	<input type="text"/>
Middle name:	<input type="text"/>
Last name:	<input type="text"/>

Company code/Enterprise code:	<input type="text"/>
OR	
Registration number:	<input type="text"/>
Registered Name:	<input type="text"/>

Address (Residence address if Person OR Head office address if Organization/ Foreigners fill in only Phone-Email-Country-Province/City)

Phone:	<input type="text"/>	Sector:	<input type="text"/>
Email:	<input type="text"/>	Cell:	<input type="text"/>
Country:	<input type="text"/>	Street name and house number:	<input type="text"/>
Province:	<input type="text"/>	P. O. Box:	<input type="text"/>
District:	<input type="text"/>		

Representative of applicant

ID document (ID card or passport):	<input type="text"/>	First Name:	<input type="text"/>
ID document number:	<input type="text"/>	Middle Name:	<input type="text"/>
Country:	<input type="text"/>	Last Name:	<input type="text"/>

Address (Foreigners fill in only Phone-Email-Country-Province/City)

Phone:	<input type="text"/>	Sector:	<input type="text"/>
Email:	<input type="text"/>	Cell:	<input type="text"/>
Country:	<input type="text"/>	Street name and house number:	<input type="text"/>
Province:	<input type="text"/>	P. O. Box:	<input type="text"/>
District:	<input type="text"/>		

IV. Attachments

- Fee payment receipt slip
- Copy of ID document
- Power of attorney
- Certificate of Registration
- Other (*evidences*)
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Signatures

I hereby certify that the information given to the best of my knowledge is true, complete and all signatures in the attachments are made by the persons stated. I also understand that any false declaration may lead to prosecution.

Date: Applicant's Signature: