

II. Trade name information

Does the Trade name contain a word or words without any particular form or presentation (yes)

Is colour claimed as an element of the Trade name (yes)

If “yes” state which colour(s):.....

Is the application for registration of a three-dimensional Trade name (yes)
(ensure that the representation illustrates it clearly)

Is the registration for a collective Trade name (yes)
(provide a copy of the regulations for its use in accordance with the law)

List of Goods and/or Services for which the Trade name is to be registered:

Descriptions:	Classes as by the Nice classification:

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):
ID document number:
Country:
First name:
Middle name:
Last name:

Company code/Enterprise code:
OR
Registration number:
Registered Name:

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

Phone:		Sector:	
Email:		Cell:	
Country:		Street name and house number:	
Province:		P. O. Box:	
District:			

Representative of applicant

ID document (ID card or passport):		First Name:	
ID document number:		Middle Name:	
Country:		Last Name:	

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

Phone:		Sector:	
Email:		Cell:	
Country:		Street name and house number:	
Province:		P. O. Box:	
District:			

IV. Owner information

Owner is the applicant (Please cross out if owner is the same as applicant)

(Please cross out the type of owner and fill in the required information accordingly if it is different from applicant. If owners are more than one, please add new page)

Natural person

Organization

ID document (ID card or passport):
[Grid]
ID document number:
[Grid]
Country:
[Grid]
First name:
[Grid]
Middle name:
[Grid]
Last name:
[Grid]

Company code/Enterprise code:
[Grid]
OR
Registration number:
[Grid]
Registered Name:
[Grid]

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

Phone: [Grid]	Sector: [Grid]
Email: [Grid]	Cell: [Grid]
Country: [Grid]	Street name and house number: [Grid]
Province: [Grid]	P. O. Box: [Grid]
District: [Grid]	

Representative of owner

ID document (ID card or passport): [Grid]	First Name: [Grid]
ID document number: [Grid]	Middle Name: [Grid]
Country: [Grid]	Last Name: [Grid]

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

Phone: [Grid]	Sector: [Grid]
Email: [Grid]	Cell: [Grid]
Country: [Grid]	Street name and house number: [Grid]
Province: [Grid]	P. O. Box: [Grid]
District: [Grid]	

V. Attachments

<input type="checkbox"/> 4 identical copies of the representation (<i>specimen</i>) of the Trade name
<input type="checkbox"/> Claim of priority
<input type="checkbox"/> Copy of regulations for a collective Trade name
<input type="checkbox"/> Fee payment receipt slip
<input type="checkbox"/> Copy of ID document
<input type="checkbox"/> Power of attorney
<input type="checkbox"/> Certificate of Registration
<input type="checkbox"/> Other
.....
.....

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: