

STATUTORY INSTRUMENTS

1986 No. 1367

TRADE MARKS

The Trade Marks and Service Marks (Forms) Rules 1986

<i>Made</i>	- - -	<i>4th August 1986</i>
<i>Laid before Parliament</i>		<i>20th August 1986</i>
<i>Coming into Operation</i>		<i>1st October 1986</i>

Whereas in pursuance of the requirements of section 40(3) of the Trade Marks Act 1938(a) the Secretary of State has, before making the following Rules under that Act, published notice of his intention to make such Rules and of the place where copies of the draft Rules might be obtained by advertising such notice in the Trade Marks Journal on 28 May 1986 and 4 June 1986 and the Official Journal (Patents) on 29 May 1986 and 4 June 1986, (being the manner which he considered most expedient so as to enable persons affected to make representations to him before the Rules were finally settled:

Now, therefore, the Secretary of State, in exercise of the powers conferred by section 40 of the Trade Marks Act 1938 and now vested in him(b) and after consultation with the Council on Tribunals pursuant to section 10(1) of the Tribunals and Inquiries Act 1971(c), hereby makes the following Rules:—

1. These Rules may be cited as the Trade Marks and Service Marks (Forms) Rules 1986 and shall come into operation on 1st October 1986.

2. These Rules shall be construed as one with the Trade Marks and Service Marks Rules 1986(d) (“the principal Rules”).

3.— (1) The forms mentioned in the principal Rules are those set out in the Schedule to these Rules.

(2) Replicas of those forms shall be used wherever required by the principal Rules.

(3) The forms shall not be modified without the consent of the Registrar.

(a) 1938 c. 22; the Act was applied, with modifications, to service marks by the Trade Marks (Amendment) Act 1984 (c. 19), section 1, as amended by the Patents, Designs and Marks Act 1986 (c. 39), section 2(1) and Schedule 3.

(b) S.I. 1970/1537.

(c) 1971 c. 62.

(d) S.I. 1986/1319.

(4) Any instruction on a form about the way in which it is to be completed shall be complied with.

4th August 1986.

Geoffrey Pattie,
Minister of State,
Department of Trade and Industry.

Rule 3

SCHEDULE

FORMS

List of Forms

- TM 1 Form of authorisation where an agent is appointed during the course of proceedings before the Registrar or where one agent is substituted for another.
- TM 2 Application for registration of a trade mark or service mark.
- TM 4 Additional representation of trade mark or service mark to accompany application for registration.
- TM 5 Request to the Registrar for statement of grounds for decision.
- TM 6 Application for registration of a certification trade mark.
- TM 7 Notice of opposition to application for registration of a trade mark or service mark.
- TM 8 Form of counterstatement for opposition, rectification, alteration or conversion.
- TM 9 Notice to the Registrar of attendance at hearing.
- TM 10 Payment of registration fee for a trade mark or service mark.
- TM 11 Form for renewal of registration.
- TM 13 Application for the restoration and renewal of a trade mark or service mark removed from the register through non-payment of the renewal fee.
- TM 14 Application for extension of time for the registration of the name of a corporation as subsequent proprietor of a trade mark or service mark in the register.
- TM 16 Application to register a subsequent proprietor of a trade mark or service mark upon the same devolution of title.
- TM 18 Request for alteration of trade or business address in the register of trade marks.
- TM 19 Application to dissolve the association between a registered trade mark or service mark and another registered trade mark or service mark.
- TM 20 Request for correction of clerical error, or for permission to amend an application.
- TM 21 Request to enter change of name of registered proprietor or registered user (or identity of partners in a Scottish partnership) of a trade mark or service mark in the register.
- TM 22 Request by the registered proprietor of a trade mark or service mark for cancellation of an entry in the register.
- TM 23 Request by the registered proprietor of a trade mark or service mark to strike out goods or services from those for which the mark is registered.

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- TM 24 Request by the registered proprietor of a trade mark or service mark for entry of disclaimer or memorandum in the register.
- TM 25 Application by the registered proprietor for an addition to or alteration of a registered trade mark or service mark.
- TM 26 Application for the rectification or removal of a trade mark or service mark in or from the register.
- TM 27 Application to intervene in proceedings for rectification or removal of a trade mark or service mark in or from the register.
- TM 30 Appeal to the Secretary of State against a decision of the Registrar.
- TM 31 Request for Registrar's general certificate, including certificate of registration of a trade mark or service mark.
- TM 32 Application for registration of a defensive trade mark.
- TM 33 Request to enter, alter or substitute an address for service.
- TM 35 Request for consent of the Secretary of State to alter the deposited regulations for use of a certification trade mark.
- TM 36 Application to the Secretary of State for an order for the expunging or variation of an entry in the register relating to a certification trade mark or for varying the deposited regulations.
- TM 37 Notice of opposition to application for registration of a certification trade mark.
- TM 40 Application for a certificate or notification of approval of the registrar in connection with a proposed assignment of a registered trade mark or service mark.
- TM 43 Application for directions for the advertisement of an assignment of trade marks or service marks without the goodwill of the business.
- TM 44 Application for extension of time in which to apply for directions for the advertisement of an assignment of trade marks or service marks without the goodwill of the business.
- TM 45 Application by the registered proprietor of a trade mark for the conversion of the specification from Schedule 3 to Schedule 4.
- TM 46 Notice of opposition to proposal for conversion of specification.
- TM 47 Notice of opposition to application under section 35 for addition to or alteration of a registered trade mark or service mark.
- TM 48 Notice of order of Court for alteration or rectification of register of trade marks.
- TM 49 Request to the Registrar by the registered proprietor for entry on the register and advertisement of a note of a certificate of validity by the court under section 47.
- TM 50 Application for the registration of a registered user.
- TM 51 Application by the registered proprietor of a trade mark or service mark for variation of entry of a registered user with regard to goods, services, conditions or restrictions.
- TM 52 Application for the cancellation of entry of a registered user.
- TM 54 Notice of intention to intervene in proceedings for the variation or cancellation of an entry of a registered user of a trade mark or service mark.
- TM 55 Form for continuance in collection of refused cotton marks.
- TM 56 Request for a certificate of an entry in the Manchester Record of the register of trade marks.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

No fee is payable for filing this form.

This must be a UK or Isle of Man address.

Mark appropriate box with an X.

The Patent Office

Trade Marks

Form TM1

Form of authorisation where an agent is appointed during the course of proceedings before the Registrar or where one agent is substituted for another

1 Number of application or registration for which authorisation, as shown in Part 3 below, is given

2 Name of agent

Agent's Patent Office ADP Number (if known)

Address of Agent

Postcode

Agent's own reference

3 In which of the following is the Agent shown at Part 2 above authorised to act

Application and Registration?

All post Registration matters?

Registered User proceedings?

For an opponent to the application shown at 1 above?

Opposition Number (if known)


For an applicant for rectification of the register in respect of the Mark shown at 1 above who is not the Registered Proprietor of that Mark?

Rectification Number (if known)

Please turn over

Enter the name of each applicant or proprietor. Names of individuals must be given in full. Bodies corporate should be designated by their corporate name.

Give normal trade or business address

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

4 Name and address of applicant, proprietor or person who is authorising agent		
Name		
Address		
County/State		
Postcode/Zipcode		
Country		
I request that all communications be sent to the address given in Part 2 overleaf		
Signature	Date	19
	Day	Month Year
Name (BLOCK LETTERS)		

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

FOR OFFICIAL USE ONLY	
DATE	
MARK TYPE	
COUNTRY CODE	
USE CODE	
SHEFFIELD NO	

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

If you do not have enough space please continue on a separate sheet of paper.

Registration is in either Part A or Part B of the Register. Most applicants apply in Part A but if after examination it is decided that the application can only be accepted in Part B the Registrar will allow the application form to be amended.

All representations must be clear and durable.

Representations of a large size may be folded but must be mounted on linen or other suitable material and fixed in place opposite. You will also need to send an additional 3 copies of the representation of the mark, with this application, each on a separate Form TM4.

Only complete Part 4 if this application is for a series of marks. If the application is for a series, insert the number of marks in the series in the box opposite.

The Patent Office

Trade Marks

Form TM 2

Application for registration of a Trade Mark or Service Mark

1 Class of goods or services for which this application is made

Class number

2 Part of the Register in which this application is made

Insert A or B as appropriate

3 Representation of mark applied for

4 Application under Section 21 (2) for a series of marks

Only specify goods or services appropriate to one class. A separate application is required for each class of goods or services for which registration is required.

5 Specification of goods or service for which registration is sought:

Enter the name of each applicant. Names of individuals should be entered in full. The names of all partners in a firm must be given in full. Bodies corporate should be designated by their corporate name.

Give the full normal trade or business address of the applicant

Only companies incorporated in the United States of America or Australia are required to give the State of Incorporation.

6 Applicant details

Applicant's Patent Office
ADP Number (if known)

Name

Address

County/State

Postcode/Zipcode

Country

7

Country of Incorporation

State of Incorporation (if appropriate):

8 Agents details (if any)	
Name	
Address	Agents Patent Office ADP number (if known) <input style="width: 150px; height: 15px;" type="text"/>
Postcode	
Agent's own reference <input style="width: 150px; height: 15px;" type="text"/>	
9 Address for Service	
Postcode	
10 If the application is proceeding under the provisions of Section 29(1)(a) or (b) insert (a) or (b) as appropriate <input style="width: 40px; height: 15px;" type="text"/>	
11 Name of country and date claimed under International Convention:	
	Country <input style="width: 150px;" type="text"/>
	Day Month Year
FOR OFFICAL USE ONLY	

Applicants resident abroad *MUST* give a UK or Isle of Man address for service to which all correspondence from the Trade Marks Registry will be sent. This should be entered in Part 9 if it is not the address of an agent nominated in Part 8.

If the applicant relies on Section 29(1)(b) Form TM No 50 should accompany the application. If Part 10 is left blank, it will be assumed that the applicant claims that the mark is being used, or is proposed to be used by him whether or not a Form TM No 50 accompanies the application.

Only complete Part 11 if you are claiming priority under international convention.

Please turn over

Please insert any additional requirements; for example, a translation, a colour limit etc. Any disclaimer or condition required by the Registrar should also be entered in this section. The Registrar will advise on such requirements (if appropriate) following examination.

12 Additional requirements

Please Sign here ►

This application form must be signed by either:

- The applicant
 - A partner authorised to act on behalf of a firm
 - a director or secretary of a corporate body
- or — the applicants authorised agent.

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Signature	Date
	19
	Day Month Year
Name (BLOCK LETTERS)	
Reminder Have you attached	
Copy of Form TM 50 if applying for registration of Registered User under Section 29(1)b of the Trade Marks Act 1938?	<input type="checkbox"/>
3 copies of a Representation of the Trade Mark or Service Mark, each on a separate Form TM 4?	<input type="checkbox"/>
any continuation sheets? (if appropriate)	<input type="checkbox"/>

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line.

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

No fee is payable for filing this form.

The Patent Office

Trade Marks

Form TM4

Additional Representation of Trade Mark or Service Mark to accompany application for registration

Please fix one representation of the Trade Mark or Service Mark in place opposite. It must correspond exactly in all respects with the representation on the application form (TM2, TM6 or TM32 as appropriate). Representations of a large size may be folded but must be mounted on linen or other suitable material and fixed in place opposite.

You are required to send three copies of the Representation of the Trade Mark or Service Mark with each Application, each on a separate Form TM4.

All representations should be of uniform quality, well defined and clear and durable.

1 Additional representation

Please turn over

Enter the name of each applicant or proprietor. Names of individuals must be given in full. Bodies corporate should be designated by their corporate name.

2 Name of Applicant

3 Specification of goods or services for which registration is sought:

Part 4 should only be completed if this form is being refiled.

4 Trade Mark or Service Mark Application Number, (only if being refiled)

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink

For details of current fees please contact the Trade Marks Registry.

If the Registrar has made any requirements to which the applicant does not object, the applicant must comply with them before the Registrar will issue the grounds of his decision.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

The Patent Office			
Trade Marks		Form TM5	
Request to the Registrar for Statement of Grounds of Decision			
1 Trade Mark or Service Mark Application Number	<input style="width: 100%;" type="text"/>		
2 Class Number	<input style="width: 100%;" type="text"/>		
3 Name of applicant or agent for the statement of grounds of decision and the address to which the decision should be sent			
Name			
Address			
Postcode			
4 Agent's own reference	<input style="width: 100%;" type="text"/>		
5a Date of Hearing		Date	
		Day	Month 19
		Year	
5b Date of Registrar's Decision		Date	
		Day	Month 19
		Year	
Signature		Date	
		Day	Month 19
		Year	
Name (BLOCK LETTERS)			

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

FOR OFFICIAL USE ONLY	
DATE	
MARK TYPE	
COUNTRY CODE	
USE CODE	
SHEFFIELD NO	

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

All representations must be clear and durable.

Representations of a large size may be folded but must be mounted on linen or other suitable material and fixed in place opposite. You will also need to send an additional 3 copies of the representation of the mark, with this application each on a separate Form TM4.

Only complete Part 3 if this application is for a series of marks. If the application is for a series, insert the number of marks in the series in the box opposite.

The Patent Office	
Trade Marks	Form TM 6
Application for registration of a Certification Trade Mark	
1 Class of goods for which this application is made	Class Number <input type="text"/>
2 Representation of mark applied for	
3 Application under Section 21 (2) for a series of <input type="text"/> marks	

Only specify goods appropriate to one class. A separate application is required for each class of goods for which registration is required.

4 Specification of goods for which registration is sought:

Enter the name of each applicant. Names of individuals should be entered in full. The names of all partners in a firm must be given in full. Bodies corporate should be designated by their corporate name.

Give the full normal trade or business address of the applicant

Only companies incorporated in the United States of America or Australia are required to give the State of Incorporation.

5 Applicant details

Applicant's Patent Office
ADP NUMBER (if known)

Name

Address

County/State

Postcode/Zipcode

Country

6 Country of Incorporation:

State of Incorporation (if appropriate):

7 Agents details (if any)	
Name	
Agents Patent Office ADP number (if known)	
Address	
Postcode	
Agent's own reference	
8 Address for Service	
Postcode	
9 Name of country and date claimed under International Convention:	Country
Day Month Year	
FOR OFFICAL USE ONLY	

Applicants resident abroad *MUST* give a UK or Isle of Man address for service to which all correspondence from the Trade Mark Registry will be sent. This should be entered in Part 8 if it is not the address of an agent nominated in Part 7.

Only complete Part 9 if you are claiming priority under international convention.

Please turn over

Please insert any additional requirements; for example, a translation, a colour limit etc. Any disclaimer or condition required by the Registrar should also be entered in this section. The Registrar will advise on such requirements (if appropriate) following examination.

10 Additional requirements

Please Sign here ►

This application form must be signed by either:

- The applicant
 - A partner authorised to act on behalf of a firm
 - a director or secretary of a corporate body
- or — the applicants authorised agent.

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Signature	Date
	19
	Day Month Year
Name (BLOCK LETTERS)	
Reminder Have you attached	
3 copies of a Representation of the Certification Trade Mark, each on a separate Form TM 4?	<input type="checkbox"/>
any continuation sheets? (if appropriate)	<input type="checkbox"/>

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

This form must be filed in duplicate.

The Patent Office

Trade Marks

Form TM7

Notice of opposition to application for registration of a Trade Mark or Service Mark

1 Number of the application against which opposition is lodged

Class number

2 Please give details of the Trade Marks Journal in which the above application was advertised

Date of Journal

Day Month Year

Journal number

Page number

Opponent's Patent Office ADP Number (if known)

Give the opponent's full and normal trade or business address.

3 Full name and address of opponent

Name

Address

County/State

Postcode/Zipcode

Country

Please turn over

Set out in full the grounds of opposition.

Please note if Registration is opposed on the grounds that the mark resembles marks already on the Register or the subject of a current application, the numbers of those marks and the Journals in which they have been advertised should also be given. Also give the numbers of any marks in the Collection of Refused Cotton Marks (if appropriate).

4 Grounds for opposition to registration

5 Agent's details (if any)

Name

Agent's Patent Office ADP Number (if known)

Agent's own reference

6 Address for service

Postcode

Signature

Date

19

Day

month

Year

Name (BLOCK LETTERS)

Reminder

Have you attached a duplicate copy of this form?

An opponent resident abroad must give A UK address for service to which all correspondence from the Patent Office will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees please contact the Trade Mark Registry.

This form must be filed in duplicate.

Please complete the appropriate column opposite.

Only one column should be completed.

The Patent Office

Trade Marks

Form TM8

Form of counterstatement for opposition, rectification, alteration or conversion,

Oppositions

1 Number of the Trade Mark or Service Mark application which is being opposed

2 Name of Applicant for Registration

3 Opposition Number

4 On a separate sheet of paper attach the following information

Details of grounds upon which the Applicant relies as supporting his application
Details of any allegations in the notice of opposition that the applicant is admitting

Rectifications, alterations or conversions

1 Registration number of the Trade Mark or Service Mark for rectification, alteration or conversion

2 Name of Registered Proprietor

3 Rectification Number

4 On a separate sheet of paper attach the following information

Details of the grounds upon which the Registered Proprietor relies as supporting his registration or conversion
Details of any allegations in the notice of rectification, alteration or conversion that the registered proprietor is admitting

Please turn over

An applicant or registered proprietor resident abroad must give a UK or Isle of Man address for service to which all correspondence from the Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

5 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)	<input type="text"/>	
Agents own reference	<input type="text"/>	
6 Address for Service		
Postcode		
Signature	Date	
	Day	Month
		19
		Year
Name (BLOCK LETTERS)		
Reminder		
Have you attached A duplicate copy of this form	<input type="checkbox"/>	
Details as specified in Part 4 of this form	<input type="checkbox"/>	

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees please contact the Trade Marks Registry.

If the hearing is in respect of an opposition please give the opposition number (if known), in the section opposite.

If the hearing is in respect of a rectification please give the rectification number (if known), in the section opposite.

If the hearing is in respect of other matters please give details in the section opposite.

If the applicant for the hearing is resident abroad a UK or Isle of Man address **must** be given, to which all correspondence from the Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

The Patent Office							
Trade Marks	Form TM9						
Notice to the Registrar of attendance at Hearing							
1 Trade Mark or Service Mark application or registration number, in respect of which the hearing is being held	<input style="width: 90%;" type="text"/>						
2 Reason for Hearing							
Opposition to Registration	<input type="checkbox"/>						
Opposition Number (if known)	<input style="width: 90%;" type="text"/>						
Rectification of the Register	<input type="checkbox"/>						
Rectification Number (if known)	<input style="width: 90%;" type="text"/>						
Other matters	<input type="checkbox"/>						
If the Hearing is to deal with matters other than an Opposition or Rectification, please give details							
3 I confirm that the Hearing of the Registrar in the above matter arranged for							
Time (hours)	_____						
Date	_____						
will be attended by me/us or, by some person on my/our behalf	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center;">19</td> <td style="width: 20%;"></td> </tr> <tr> <td style="text-align: center;">Day Month</td> <td style="text-align: center;">Year</td> <td></td> </tr> </table>		19		Day Month	Year	
	19						
Day Month	Year						
4 Address for service							
Postcode							
Signature	Date						

	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center;">19</td> <td style="width: 20%;"></td> </tr> <tr> <td style="text-align: center;">Day Month</td> <td style="text-align: center;">Year</td> <td></td> </tr> </table>		19		Day Month	Year	
	19						
Day Month	Year						
Name (BLOCK LETTERS)							

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees please contact the Trade Marks Registry.

Please note that a separate form is required for each Registration.

Applicants resident abroad **must** give a UK or Isle of Man address for service which will be entered on the register and to which all correspondence from the Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

The Patent Office	
Trade Marks	Form TM10
Payment of registration fee for a Trade Mark or Service Mark	
1 Trade Mark or Service Mark application number	<input type="text"/>
Class Number	<input type="text"/>
2 Number of the Journal in which this application was advertised	<input type="text"/>
3 Address for Service	
Postcode	
Declaration	
I declare that any written undertakings given to the Registrar to send notice of the advertisement of the application to other proprietors have been fulfilled. To the best of my knowledge and belief, either the period or extended period for filing opposition to the application has expired without any notice of opposition having been filed, or any oppositions filed have finally been determined in favour of the applicant.	
Signature	Date
	19
	Day Month Year
Name (BLOCK LETTERS)	

Form No TM11

Your reference _____ Our reference _____ Date _____	For information on how and where to pay the renewal fee please turn over
--	--

1 Reminder as to payment of Renewal Fee

This is to remind you that if you intend to renew the Mark referred to below for a further period of 14 years, you should complete Parts 2 (where appropriate) and 4 and return the entire form with fee to the above address by the date shown below.

Due date of renewal	Registration Number	Class	Advertised in Trade Marks Journal No	Fee
_____	_____	_____	_____	_____

If you are paying an additional fee (See Note 2 overleaf) please tick this box

2 Name and address of person paying the fee
(if not the registered proprietor)

Name _____

Address _____

Attention is drawn to Rule 66 of the Trade Marks and Service Marks Rules 1986.

DECLARATION

I declare that I am directed by the proprietor of the above mentioned trade mark or service mark to pay the requested renewal fee.

Signature _____

Date: _____

3 Certificate of payment of Renewal Fee

This is to certify that the prescribed fee has been paid and that

Trade Mark or
 Service Mark No _____ has been renewed for a period of 14 years from _____

4 Please give the name and address to which this renewal certificate should be sent

 Patent Office
 date stamp

Please Do Not Detach This Certificate
The Patent Office Will Date And Return This Certificate When Renewal Is Effected

1 How do I pay the Renewal Fee?

Please complete parts 2 and 4 of this form and return it together with — Form FSI (Fee Sheet)

and — the renewal fee

to — **The Cashier
The Patent Office
State House
66-71 High Holborn
London WC1R 4TP**

Payment may be in cash, by postal order, money order, Bankers Draft or cheque (payable to "The Comptroller-General, Patent Office" and crossed).

2 When do I have to pay an Additional Fee?

An additional fee **MUST** be paid if the renewal fee is paid after the mark has been advertised in the unpaid list in the Trade Marks Journal and within one month from the date of publication of the unpaid list.

If renewal is not effected within one month of the date of advertisement of the Mark in the "unpaid list" it expires and is removed from the Register.

If the Trade Mark or Service Mark has been removed from the Register, because of non-payment of the renewal fee and you wish to have it restored, you must complete Form TM 13.

Important

If any of the following changes have taken place please mark the appropriate box and file the form quoted.

If the appropriate form has already been filed no further action is required.

Change of Ownership (Assignment)—TM16	<input type="checkbox"/>	Date (if appropriate) form filed	<input type="checkbox"/>
Change of Name— TM21	<input type="checkbox"/>	Date (if appropriate) form filed	<input type="checkbox"/>
Change of Address For Service—TM33	<input type="checkbox"/>	Date (if appropriate) form filed	<input type="checkbox"/>

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink
For details of current fees please contact the Trade Mark Registry.

Attention is drawn to Rule 68 of the Trade Marks and Service Marks Rules 1986.
This form **must** be accompanied by both the prescribed restoration fee **and** the renewal fee.

The Patent Office

Trade Marks Form TM13

Application for the restoration and renewal of a Trade Mark or Service Mark removed from the Register through non-payment of the renewal fee

1 Registration number of the Mark for which the application for restoration to the Register and renewal is made

Class number

2 Name of Applicant for Restoration and Renewal

Address

Signature	Date		
	Day	Month	19 Year

Name (BLOCK LETTERS)

Please sign here ▶

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

3 Certificate of Payment of renewal fee

This is to certify that the prescribed fee has been paid and that

Trade Mark or Service Mark No.
has been restored to the Register

and has been renewed for a period of 14 years from

4 Please give the name and address to which this certificate should be sent

Patent Office date stamp

Please do not detach this Certificate. The Patent Office will date and return this Certificate if restoration and renewal is allowed.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink

Attention is drawn to Rule 76 of the Trade Marks and Service Marks Rules 1986, and Section 29(4) of the Trade Marks Act 1938.

No fee is payable for filing this form.

The Patent Office

Trade Marks

Form TM14

Application for extension of time for the registration of the name of a corporation as subsequent proprietor of a Trade Mark or Service Mark in the register

1 Trade Mark or Service Mark
Registration Number

Class Number

2 Extension of time

Filing of this form at the Patent Office will be considered as a request for the maximum allowable extension period of six months, beyond the six months period allowed by Section 29(4)

3 Agent's details (if any)

Name

Agent's Patent Office ADP Number
(if known)

Address

Postcode

Agents own reference

Signature

Date

Day Month 19 Year

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Name (BLOCK LETTERS)

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

If you do not have enough space please use a separate sheet of paper.

An application under rule 62(2) for treatment of an assignee as an applicant for registration may be made on this form but only at the same time as an application under rule 71.

Enter the names of each subsequent proprietor. Names of individuals should be entered in full. The names of all partners in a firm must be given in full. Bodies corporate should be designated by their corporate name.

Only companies incorporated in the United States of America or Australia are required to give the State of Incorporation.

The Patent Office

Trade Marks Form TM16

Application to register a Subsequent Proprietor of a Trade Mark or Service Mark upon the same devolution of title

1 Registration or Application Number and Class Number of the Mark(s) which are to be assigned

Application or Registration Number	Class Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

2 Full name of Registered Proprietor

3 Subsequent Proprietor details

Name

Address

County/State

Postcode/Zipcode

Country

**4 Country of Incorporation
State of Incorporation (if appropriate)**

5 Date of acquisition of proprietorship

Date	19
Day Month Year	

Please turn over

Attach a copy of the instrument under which the transferee claims ownership.

Mark correct box with an X
When an assignment includes Marks assigned with goodwill and others without goodwill then the list of Marks in Part 1 (and any continuation sheets) should clearly indicate those being assigned without the goodwill of the business. For those Marks assigned without goodwill and where the Mark was in use, a Form TM43 must be filed with this application.

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

New proprietors resident abroad must give a UK or Isle of Man address for service to which all correspondence from the Trade Marks Registry will be sent. Form TM33 should be used for this purpose.

Please sign here ►

6 Full particulars of the instrument of assignment or transmission (if any), or statement of case		
Date of instrument of assignment	Date	
	Day	Month
	19	Year
7a Was the Mark(s) in use by the business in respect of the goods or services in question?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7b If the Mark(s) were in use does the Assignment include the goodwill of the business in the goods or services for which the Mark(s) is (are) Registered?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)	<input style="width: 100%;" type="text"/>	
Agent's own reference	<input style="width: 100%;" type="text"/>	
Signature	Date	
	Day	Month
	19	Year
Name (BLOCK LETTERS)		
Reminder		
Have you attached		
a copy of the the instrument under which the transferee claims title?	<input type="checkbox"/>	
a Form TM43 (if appropriate)?	<input type="checkbox"/>	
a Form TM33 (if appropriate)?	<input type="checkbox"/>	
any continuation sheets (if appropriate)?	<input type="checkbox"/>	

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink

No fee is payable for filing this form.

When the address to be altered is for a **REGISTERED USER** the appropriate Registered User number **must** be entered opposite **prefixed by the letters RU.**

If you do not have enough space please use a separate sheet of paper,

The Patent Office

Trade Marks

Form TM18

Request for alteration of trade or business address in the Register of Trade Marks

1 Trade Mark, Service Mark, or Registered User Registration number

Class Number

2 Full name of Registered Proprietor or Registered user currently on Register

3 New address to be entered on Register


Address

County/State

Postcode/Zipcode

Country

4 Agent's details (if any)	
Name	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Address	
Postcode	
Agent's own reference	<input type="text"/>
Signature	Date
	Day Month 19
	Year
Name (BLOCK LETTERS)	
Reminder Have you attached any continuation sheets <input type="checkbox"/> (if appropriate)?	

Please sign here 

Attention is drawn to Rules 10
and 14 of the Trade Marks and
Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK CAPITALS using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 61 of the Trade Marks and Service Marks Rules 1986 and Section 23(5) of the Trade Marks Act 1938.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM19

Application to dissolve the association between a registered Trade Mark or Service Mark and another registered Trade Mark or Service Mark

1 Mark which is to have its association with those shown in Part 2 below dissolved

Registration Number

Class Number

2 Marks which are to have their association with that in Part 1 above dissolved

Registration Number

Class Number

3 Full name and address of Registered Proprietor

Name

Address

County/State

Postcode/Zipcode

Country

4 A Statement of case setting out the grounds for this application must be attached on a separate sheet of paper

Please turn over

5 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)		<input type="text"/>
Address		
Postcode		
Agent's own reference		<input type="text"/>
Signature	Date	
	Day	Month Year
Name (BLOCK LETTERS)		
Reminder		
Have you attached		
any continuation sheets (if appropriate)?	<input type="checkbox"/>	
a Statement of Case (Part 4)?	<input type="checkbox"/>	

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK CAPITALS using dark ink

For details of current please contact the Trade Marks Registry.

Please Mark correct box with an X

Where correction of a clerical error is requested a statutory declaration or other suitable evidence should be attached to prove that the error was genuine.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM20

**Request for correction of clerical error,
or for permission to amend an application**

1 Application Number or
Registration Number

Class number

2 Is the above Mark

Registered?

or Pending?

3 Full name and address of applicant for Registration or
Registered Proprietor

4 Details to be amended or corrected

Please turn over

5 Agent's details (if any)	
Name	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Address	
Postcode	
Agent's own reference	<input type="text"/>
Signature	Date
	Day Month Year
Name (BLOCK LETTERS)	
Reminder	
Have you attached	
any continuation sheets (if appropriate)?	<input type="checkbox"/>

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

No fee is payable for filing this form.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM21

Request to enter change of name of registered proprietor or registered user (or identity of partners in a Scottish partnership) of a Trade Mark or Service Mark in the Register

1 Registration Numbers and Class Numbers of the Marks affected by the change

Registration Number	Class Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Mark appropriate box with an X

2 Is the name to be changed that of the Registered Proprietor or Registered User of the Marks shown above?

Registered Proprietor?

Registered User?

3 Give full name of Registered Proprietor or Registered User at present on the register

Attention is drawn to Rule 85(2) of the Trade Marks and Service Marks Rules 1986.

4 New name to be entered in Register or full names of partners

Please turn over

5 Agent's details (if any)	
Name	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Address	
Postcode	
Agent's own reference	<input type="text"/>
Declaration I declare that there has been no change in the actual proprietorship of the Registered Mark, or identity of the Registered User.	
Signature	Date
	Day Month 19 Year
Name (BLOCK LETTERS)	
Reminder Have you attached any continuation sheets (if appropriate)? <input type="checkbox"/>	

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

No fee is payable for filing this form.

Attention is drawn to Section 34(1)(c) of the Trade Marks Act 1938 and Rules 85 and 86 of the Trade Marks and Service Marks Rules 1986.

The Patent Office

Trade Marks Form TM22

Request by the registered proprietor of a Trade Mark or Service Mark for cancellation of an entry in the register

1 Registration Number of the Mark to be cancelled

Class number

2 Full name of Registered Proprietor

3 Agent's details (if any)
Name

Agent's Patent Office ADP Number (if known)

Address

Postcode

Agent's own reference

Signature Date
19
Day Month Year

Name (BLOCK LETTERS)

Please sign here

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Section 34(1)(d) of the Trade Marks Act 1938 and Rules 85 and 86 of the Trade Marks and Service Marks Rules 1986.

The Patent Office

Trade Marks Form TM23

Request by the registered proprietor of a Trade Mark or Service Mark to strike out goods or services from those for which the Mark is registered

1 Registration Number of the Mark concerned

Class Number

2 Full name and address of Registered Proprietor
Name

Address

Postcode

3 Goods or services to be struck out

4 Agent's details (if any)

Name

Agent's Patent Office ADP Number (if known)

Address

Postcode

Agent's own reference

Signature

Date

19

Day Month Year

Name (BLOCK LETTERS)

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

If you do not have enough space please use a separate sheet of paper.

Please sign here ▶

Attention is drawn to Rules 10 and 14 of the Trade Marks Rules 1986.

The Patent Office	
Trade Marks	Form TM24
Request by the registered proprietor of a Trade Mark or Service Mark for entry of disclaimer or Memorandum in the Register	
1 Registration Number of the Mark concerned	<input style="width: 90%;" type="text"/>
Class number	<input style="width: 50%;" type="text"/>
2 Full name and address of Registered Proprietor	
3 Details of disclaimer or memorandum to be entered on the Register	
4 Agent's details (if any)	
Name	
Agent's Patent Office ADP Number (if known)	<input style="width: 90%;" type="text"/>
Agent's own reference	<input style="width: 90%;" type="text"/>
Signature	Date
	_____ 19
	Day Month Year
Name (BLOCK LETTERS)	

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rules 89 to 92 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM25

Application by the registered proprietor for an addition to or alteration of a registered Trade Mark or Service Mark

1 Registration Number(s) and Class Number(s) of the Mark(s) which are to be added to or altered

Registration Number Class Number

2 Full name and address of Registered Proprietor

Name

Address

Postcode

3 Give full details of the addition or alteration to be made to the Marks shown in Part 1 above

Three copies of the Mark as it will appear when altered must be filed with this form.

Please turn over

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

Where application is by the registered proprietor this form MUST be filed with a statement of case.

Where application is not by the registered proprietor two duplicate copies of this form must be filed together with three copies of a statement of case.

Insert rectification or removal as appropriate.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM26

Application for the rectification or removal of a Trade Mark or Service Mark in or from the register

1 Registration Number of the Mark for which Rectification or Removal is sought

Class number

2 Full name of Registered Proprietor

3 Full name and address of applicant for rectification or removal
Name

Address


Postcode

4 Is this application for rectification or removal of a Mark?

5 Grounds for the Rectification or Removal applied for

Please turn over

If the applicant for rectification or removal is resident abroad a UK or Isle of Man address **must** be given to which all correspondence from the Trade Marks Registry will be sent.

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

6 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)	<input type="text"/>	
Agent's own reference	<input type="text"/>	
7 Address for Service		
Postcode		
Declaration I declare that there is no action concerning the Mark in question pending in the Court		
Signature	Date	
	Day	Month
		19 Year
Name (BLOCK LETTERS)		
Reminder		
Have you attached		
Two duplicate copies of this form (if appropriate)?	<input type="checkbox"/>	
Three copies of a statement of case (if appropriate)?	<input type="checkbox"/>	
any continuation sheets (if appropriate)?	<input type="checkbox"/>	

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

The Patent Office

Trade Marks

Form TM27

Application to intervene in proceedings for rectification or removal of a Trade Mark or Service Mark in or from the register

1 Registration Number of the Mark for which rectification or removal is sought

Class number

2 Full name of Registered Proprietor

3 Full name and address of Applicant for intervention

Name

Address

Postcode

If you do not have enough space please use a separate sheet of paper.

4 Give details of the grounds of the application to intervene

Please turn over

If the intervener is resident
abroad a UK or Isle of Man
address for service **must**
be given to which all
correspondence from the
Trade Marks Registry will sent.

Please sign here ►

Attention is drawn to Rules 10 and
14 of the Trade Marks and Service
Marks Rules 1986.

5 Agent's details (if any) Name	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Agent's own reference	<input type="text"/>
6 Address for Service	
Postcode	
Signature	Date
	Day Month 19 Year
Name (BLOCK LETTERS)	
Reminder	
Have you attached	
any continuation sheets (if appropriate)?	<input type="checkbox"/>

5 A statement setting out the grounds of the appeal, and the case in support, must be attached to this form, together with the documents required by Rule 130

6 Agent's details (if any)
Name

Agent's Patent Office ADP
Number (if known)

Agent's own reference

If the appellant is resident abroad a UK or Isle of Man address **must** be given to which all correspondence from the Trade Marks Registry will be sent.

7 Address for service

Postcode

Signature

Date

19

Day

Month

Year

Please sign here ▶

Name (BLOCK LETTERS)

Reminder

Have you attached

a statement setting out the grounds of the appeal?

Documents required by Rule 130 of the Trade Marks and Service Marks Rules 1986?

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees, please contact the Trade Marks Registry.

Attention is drawn to Rule 122 of the Trade Marks and Service Marks Rules 1986

The Patent Office

Trade Marks

Form TM31

Request for Registrar's general certificate, including certificate of registration of a Trade Mark or Service Mark

1 Number of the Mark for which a Certificate is required

Class number

2 Certificate requirements

If a Certificate of registration is required, mark this box with an X otherwise set out below the particulars which the Registrar is requested to certify:

If the Certificate is for use in legal proceedings please mark this box with an X

3 If the Certificate is for use in obtaining registration abroad please list the countries for which certificates are requested:

Please turn over

4 Name and address to which the certificate is to be sent		
Name		
Address		
Postcode		
Agent's own reference	<input type="text"/>	
Signature	Date	
	Day	Month Year
Name (BLOCK LETTERS)		

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

FOR OFFICIAL USE ONLY	
DATE	
MARK TYPE	
COUNTRY CODE	
USE CODE	
SHEFFIELD NO	

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

If you do not have enough space please continue on a separate sheet of paper.

All representations must be clear and durable.

Representations of a large size may be folded but must be mounted on linen or other suitable material and fixed in place opposite. You will also need to send an additional 3 copies of the representation of the mark, with this application, each on a separate Form TM4.

Only complete Part 3 if this application is for a series of marks. If the application is for a series, insert the number of marks in the series in the box opposite.

The Patent Office	
Trade Marks	Form TM 32
Application for registration of a Defensive Trade Mark	
1 Class of goods for which this application is made	Number <input style="width: 40px; height: 15px;" type="text"/>
2 Representation of mark applied for	
3 Application under Section 21 (2) for a series of <input style="width: 40px; height: 15px;" type="text"/> marks.	

Only specify goods appropriate to one class. A separate application is required for each class of goods for which registration is required.

4 Specification of goods for which registration is sought:

Enter the name of each applicant. Names of individuals should be entered in full. The names of all partners in a firm must be given in full. Bodies corporate should be designated by their corporate name.

Give the full normal trade or business address of the applicant

Only companies incorporated in the United States of America or Australia are required to give the State of Incorporation.

5 Applicant details

Applicant's Patent Office
ADP Number (if known)

Name

Applicants Address

County/State

Postcode/Zipcode

Country

6

Country of Incorporation

State of Incorporation (if known)

Applicants resident abroad **MUST** give a UK or Isle of Man address for service to which all correspondence from the Trade Marks Registry will be sent. This should be entered in Part 8 if it is not the address of an agent nominated in Part 7.

7 Agents details (if any)	
Name	
Agents Patent Office ADP Number (if known)	<input type="text"/>
Address	
Postcode	
Agent's own reference	<input type="text"/>
8 Address for Service	
Postcode	
9 A statement of case setting out full particulars of the facts on which the applicant relies in support of his application must be attached to this application	
10 Name of country and date claimed under International Convention:	Country
	Day Month Year
FOR OFFICAL USE ONLY	

Please turn over

Please insert any additional requirements; for example, a translation, a colour limit etc. Any disclaimer or condition required by the Registrar should also be entered in this section. The Registrar will advise on such requirements (if appropriate) following examination.

11 Additional requirements

Please Sign here ►

This Application form must be signed by either:

- The applicant
 - A partner authorised to act on behalf of a partnership
 - a director or secretary of a corporate body
- or — the applicants authorised agent.

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Signature	Date
	19
	Day Month Year
Name (BLOCK LETTERS)	
Reminder Have you attached	
3 copies of a Representation of the Defensive Trade Mark, each on a separate Form TM 4?	<input type="checkbox"/>
a statement of case in support of this application.	<input type="checkbox"/>
any continuation sheets? (if appropriate)	<input type="checkbox"/>

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

No fee is payable for filing this form.

Attention is drawn to Rules 13 and 81 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

Enter Registered Proprietor or Registered User as appropriate

Please give the the full normal trade or business address

The Patent Office	
Trade Marks	Form TM33
Request to enter, alter or substitute an address for service	
1 Registration number of the mark(s) or user(s) which is to have an address for service entered, altered or substituted	
Registration Number	Class No
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
2 Is the address to be entered, altered or substituted, that of the Registered Proprietor or Registered User of the mark(s) shown above?	
3 Name and address of Registered Proprietor or Registered User whose address for service is to be entered, altered or, substituted	
Address	
County/State	
Postcode/Zipcode	
Country	

Please turn over

4 New address to be entered altered or substituted		
Address		
County/State		
Postcode/Zipcode		
Country		
Agent's Patent Office ADP Number (if known)	<input type="text"/>	
Agent's own reference	<input type="text"/>	
Signature	Date	
		19
	Day	Month Year
Reminder		
Have you attached		
any continuation sheets		<input type="checkbox"/>
(if appropriate)?		

Please sign here 

Attention is drawn to Rules
10 and 14 of the Trade Marks
and Service Marks Rules 1986.

Till receipt No.

Till receipt date

Fee taken

Filing date

Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

If you do not have enough space please use a separate sheet of paper.

The Patent Office**Trade Marks****Form TM35**

Request for the consent of the Secretary of State to alter the deposited regulations for use of a Certification Trade Mark

1 Registration Number(s) and Class Number(s) of the Certification Trade Marks which are to have their Regulations altered

Registration Number


Class Number

2 Details of alterations

The alterations required should be shown in red on a copy of the Regulations, or on a separate sheet of paper, and attached to this form

Please turn over

3 Full name of Registered Proprietor		
4 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)	<input type="text"/>	
Address		
Postcode		
Agent's own reference	<input type="text"/>	
Application is made by the Registered Proprietor for the deposited regulations governing the use of the Mark to be altered in the manner shown in red in the accompanying copies of the regulations, and for the consent of the Secretary of State to this alteration.		
Signature	Date	
	Day	Month
		19 Year
Name (BLOCK LETTERS)		
Checklist		
Have you attached		
three copies of the Regulations showing alterations in red?	<input type="checkbox"/>	
any continuation sheets (if appropriate)?	<input type="checkbox"/>	

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 93 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM36

Application to the Secretary of State for an order for the expunging or variation of an entry in the register relating to a Certification Trade Mark or for varying the deposited regulations

1 Registration Number of the Certification Trade Mark concerned

Class number

2 Full name of current Registered Proprietor

3 Name and address of the person(s) applying for expunging or variation

Name

Address

Postcode

Mark correct box with an X

4 What is this application for:

expunging of an entry in the Register?

variation of an entry in the Register?

variation of the deposited Regulations?

5 Details of the application

On a separate sheet of paper attach a statement of case setting out fully the details and reasons for your application.

Please turn over

If the applicant is resident abroad a UK or Isle of Man address for service **must** be given to which all correspondence from the Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

6 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)	<input type="text"/>	
Agent's own reference	<input type="text"/>	
7 Address for service		
Postcode		
Signature	Date	
	Day	Month
		19
		Year
Name (BLOCK LETTERS)		
Reminder		
Have you attached		
	the Statement of Case?	<input type="checkbox"/>

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees please contact the Trade Mark Registry.

The Patent Office

Trade Marks

Form TM37

**Notice of opposition to application for
Registration of a Certification Trade Mark**

1 Number of the Certification Trade Mark which is being Opposed

Class Number

2 Details of Trade Marks Journal in which this application was advertised
Date of journal

Journal number

3 Full name of Applicant for the Certification Trade Mark

4 Full name and address of opponents
Name

Address

County/State

Postcode/Zipcode

Country

Give the Opponents normal trade or business address

Please turn over

Set out the grounds of opposition.

Before setting out the grounds of opposition please refer to paragraph 1(5) of the First Schedule of the Trade Marks Act 1938.

If you do not have enough space please use a separate sheet of paper.

5 Grounds of Opposition to Registration.

6 Agents details (if any)
Name

Agent's Patent Office ADP Number (if known)

Agent's own reference

If the opponent is resident abroad a UK or Isle of Man address for service **must** be given to which all correspondence from the Trade Marks Registry will be sent.

7 Address for service

Postcode

Please sign here ▶

Signature _____ Date _____ 19____

Day Month Year

Name (BLOCK LETTERS)

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Reminder
Have you attached

continuation sheets (if any)?

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 79 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM40

Application for a certificate or notification of approval of the Registrar in connection with a proposed assignment of a registered Trade Mark or Service Mark

1 Registration Number(s) and class Number(s) of the Marks for which a certificate or notification of approval is requested

Registration Number	Class Number
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 50%;" type="text"/>

2 Full name of Registered Proprietor

3 Full name and address of proposed assignee

Name

Address

Country/State

Postcode/Zipcode

Country


4 Statement of case

A statement of case and one duplicate copy, setting out fully the circumstances of the proposed assignment, must be attached to the form together with a copy of the proposed assignment

Please turn over

Insert **Certificate** or
Notification of approval
as appropriate

5 Is this application for a certificate or a notification of approval?	
6 Agent's details (if any) Name	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Address	
Postcode	
Agent's own reference	<input type="text"/>
Signature	Date
	Day Month 19 Year
Name (BLOCK LETTERS)	
<p>Reminder</p> <p>Have you attached</p> <p> one copy of the proposed assignment? <input type="checkbox"/></p> <p> two copies of Statement of Case? <input type="checkbox"/></p> <p> any continuation sheets (if appropriate)? <input type="checkbox"/></p>	

Please sign here 

Attention is drawn to Rules 10
and 14 of the Trade Marks and
Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink
For details of current fees please contact the Trade Marks Registry

One attested copy of the instrument of assignment MUST be attached to this form.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM43

Application for directions for an advertisement of an assignment of Trade Marks or Service Marks without the goodwill of the business

1 Registration number(s) and class number(s) of the marks concerned and the goods or services for which the mark(s) has been used

Registration No.

Class No.

Goods or services for which the mark has been used and is assigned:

Registration No.

Class No.

Goods or services for which the mark has been used and is assigned:

Registration No.

Class No.

Goods or services for which the mark has been used and is assigned:

2 Full name of current Registered Proprietor (assignor)

Please turn over

Details of any unregistered Trade Marks or Service Marks assigned at the same time should be entered in this section.

**3 Unregistered Trade Mark(s) and Service Mark(s)
Representation of Mark(s)**

Goods or services for which the mark has been used and is assigned:

Enter the name of each applicant (assignee). Names of individuals should be entered in full. The names of all partners in a firm must be given in full. Bodies corporate should be designated by their corporate name.

**4 Applicant (Assignee) details
Full name and address of applicant (assignee)**

Name

Address

County/State

Postcode/Zipcode

Country

5 Date of Assignment		
Day	Month	19 Year
6 Suggested publications in which the advertisement of the assignment should appear		
7 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)		
Address		
Postcode		
Agent's own reference		
Signature	Date	
	Day	Month 19 Year
Name (BLOCK LETTERS)		
Checklist		
Have you attached		
two copies of completed form?	<input type="checkbox"/>	
one attested copy of the instrument of assignment?	<input type="checkbox"/>	
any continuation sheets (if appropriate)?	<input type="checkbox"/>	

Please sign here

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK CAPITALS** using dark ink.
No fee is payable for filing this form.

Attention is drawn to Rule 80 of the Trade Marks and Service Marks Rules 1986 and Section 22(7) of the Trade Marks Act 1938.

If the assignment is in respect of more than one registration give **only** the lowest number in the list of marks to be assigned.

The complete list of marks to be assigned **must** be provided with form TM16 and form TM43.

The Patent Office

Trade Marks

Form TM44

Application for extension of time in which to apply for directions for the advertisement of an assignment of Trade Marks or Service Marks without the goodwill of the business

1 Registration Number

Class Number

2 Full name of current registered proprietor (assignor)

3 Filing of this form at the Patent Office will be considered as a request to extend by the maximum of six months, the period allowed for filing at the Patent Office of Form TM No. 43 in connection with the Mark shown at 1 above and any others which are assigned with that mark.

This form may be filed at any time before or during the period for which extension can be allowed.

4 Agent's details (if any)
Name

Agent's ADP Number
(if known)

Address

Postcode

Agent's own reference

Signature

Date

19

Day Month

Year

Name (BLOCK LETTERS)

Please sign here 

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

Mark correct box with an X

Please fill in appropriate Class Numbers and Specification.

Attention is drawn to Rule 6 of the Trade Marks and Service Marks Rules 1986

The Patent Office

Trade Marks Form TM45

Application by a registered proprietor of a Trade Mark for the conversion of the specification from Schedule 3 to Schedule 4

1 Registration Number

Class number

2 Are there any Registered users associated with the Mark? Yes No

3 Registered Proprietor

4 Proposed specification(s) on conversion to Schedule 4

Class

Class

Class

Class

Class

Please turn over

5 Agent's details (if any)		
Name		
Agent's Patent Office ADP Number (if known)	<input type="text"/>	
Agent's own reference	<input type="text"/>	
6 Address of Agent		
Signature	Date	
	Day	Month 19
Name (BLOCK LETTERS)		

Please sign here ▶

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.
For details of current fees please contact the Trade Marks Registry.

This form MUST be filed in duplicate together with two copies of a statement showing how the proposed conversion would be contrary to Section 36(2) of the Trade Marks Act 1938.

Attention is drawn to Rule 7 of the Trade Marks and Service Marks Rules 1986.

The numbers of more than one Trade Mark dealt with by the same proposal may be given provided the specifications are the same.

If you do not have enough space please use a separate sheet of paper.

Give opponent's normal trade or business address.

Please state the grounds for opposition to the proposal for conversion of the specification.

The Patent Office

Trade Marks

Form TM46

Notice of opposition to proposal for conversion of specification

1 Registration Number(s) and Class Number(s) of the Trade Mark(s) concerned

Registration Number	Class Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

2 Details of the Trade Marks Journal in which the proposal for conversion of Specification was advertised

Date of Journal

Journal Number

3 Full name and address of opponent

Name

Address

County/State

Postcode/Zipcode

Country

4 Grounds for opposition

Please turn over

5 Agent's details (if any)	
Name	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Agent's own reference	<input type="text"/>
6 Address for Service	
Postcode	
Signature	Date
	Day Month 19 Year
Name (BLOCK LETTERS)	
Reminder	
Have you attached	
two copies of a statement showing how the proposed conversion would be contrary to Section 36(2) of the 1938 Act?	<input type="checkbox"/>
one duplicate copy of this form?	<input type="checkbox"/>
any continuation sheets (if appropriate)?	<input type="checkbox"/>

If the opponent is resident abroad a UK address for service **must** be given to which all correspondence from the Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 90 of the Trade Marks and Service Marks Rules 1986.

This form must be filed in duplicate.

The Patent Office

Trade Marks

Form TM47

Notice of opposition to application under Section 35 for addition to or alteration of a Registered Trade Mark or Service Mark

1 Registration Number

Class Number

2 Details of the Trade Marks Journal in which this application was advertised

Date of Journal

Journal Number

3 Full name of Registered Proprietor

Give full name and address.

4 Name and address of the person(s) opposing the application

Name

Address

County/State

Postcode/Zipcode

Country

Please turn over

5 Grounds for opposition

A Statement, and one duplicate copy, setting out fully the grounds for opposition MUST be attached to this form

6 Agent's details (if any)

Name

Agent's Patent Office ADP
Number (if known)

Agent's own reference

7 Address for Service

Postcode

Signature

Date

19

Day Month

Year

Name (BLOCK LETTERS)

If the opponent for the hearing is resident abroad a UK or Isle of Man address **must** be given, to which all correspondence from the Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Reminder

Have you attached
one copy of this form?

two copies of grounds for
opposition?

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 137 of the Trade Marks and Service Marks Rules 1986.

An office copy of the Order of the Court MUST be attached to this form.

The Patent Office

Trade Marks

Form TM48

Notice of Order of Court for alteration or rectification of Register of Trade Marks

1 Registration Number of the Mark to which the order of Court refers

Class Number

2 Full name of the Registered Proprietor

3 Date of Order of the Court

Day Month 19 Year

4 Details of Order of the Court

5 Agent's details (if any)
Name

Agent's Patent Office ADP Number (if known)

Agent's own reference

Please turn over

If the applicant is resident abroad a UK or Isle of Man address for service **must** be given to which all correspondence from the Trade Marks Registry will sent.

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

6 Address for Service		
Postcode		
Signature	Date	
		19
	Day	Month
Year		
Name (BLOCK LETTERS)		
Reminder		
Have you attached		
an office copy of the order of Court? <input type="checkbox"/>		

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes
 Please type or write in **BLOCK LETTERS** using dark ink
 For details of current fees please contact the Trade Marks Registry
 Attention is drawn to Rule 88 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

If there is more than one Proprietor please use a separate sheet of paper to give details of the others.

Please supply an Office copy of the Certificate of Validity.

The Patent Office

Trade Marks Form TM49

Request to the Registrar by the registered proprietor for entry on the register and advertisement of a note of a certificate of validity by the court under Section 47

1 Registration Number(s) and Class Number(s) of the Mark(s) which are to have a note of a certificate of validity entered on the Register

Registration Number	Class Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

2 Please give full name of the Registered Proprietor

3 Details of Court Proceedings
Please give, on a separate sheet of paper, full details of the nature of the Proceedings where the Court certified the validity of the Registration, with the names of the parties to them, in which the Certificate was given

4 Agent's details (if any)
 Name

Agent's Patent Office ADP Number (if known)

Agent's own reference

Please turn over

5 Address of Agent		
Postcode		
Signature	Date	
		19
	Day	Month
Year		
Name (BLOCK LETTERS)		
Reminder		
Have you attached		
a copy of the Certificate of validity?		<input type="checkbox"/>
details of Court proceedings?		<input type="checkbox"/>
any continuation sheets (if appropriate)?		<input type="checkbox"/>

Please sign here ▶

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in **BLOCK LETTERS** using dark ink
For details of current fees, please contact the Trade Marks Registry.

Before this application can be dealt with the applicant(s) must provide a Statutory Declaration made by the Proprietor or some other person authorised to act on his behalf and approved by the Registrar, giving particulars as required by Section 28(4) of the Trade Marks Act 1938.

The Patent Office

Trade Marks

Form TM50

Application for the registration of registered user

1 Registration numbers and/or application numbers, and class numbers of the marks for which this application for a Registered User is made

For registered marks

Registration Number Class Number

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--	--

--	--

For pending marks

Application Number Class Number

--	--

--	--

--	--

2 Registered Proprietor of, or applicant for, the marks shown above

Please turn over

Please give the full name and address of the proposed Registered User.

3 Name and address of the proposed Registered User
Name
Address
County/State
Postcode/Zipcode
Country

4 Goods for which the proposed Registered User (in respect of the marks shown at Part 1 overleaf) is to be Registered as a separate user

If you do not have enough space please use a separate sheet of paper.

5 Conditions or Restrictions which the Registration will (in each case) be subject to:

Mark correct box with an X

6 Is the proposed permitted use without limit of period?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
If no when is the permitted use due to end?	Date	
	Day	Month
		19
		Year

Mark correct box with an X

7 Is the application made under Section 29(1)(b) of the Trade Marks Act 1938?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>

Please turn over

The registered proprietor or his agent should sign here ▶

The proposed registered user or his agent should sign here ▶

Registered users resident abroad **must** give a UK or Isle of Man address for service to which all correspondence from the Trade Marks Registry will be sent.

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

8 Agent (if any) for Proprietor			
Signature	Date		
	Day	Month	19 Year
9 Agent (if any) for Proposed Registered User			
Signature	Date		
	Day	Month	19 Year
Name (BLOCK LETTERS)			
10 Address for Service			
Reminder			
Have you attached:			
the Statutory Declaration made by the Proprietor or some other person authorised to act on his behalf? <input type="checkbox"/>			
any continuation sheets (if appropriate)? <input type="checkbox"/>			

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 109 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

This application must be accompanied by a statement of grounds for the application and the written consent (if given) of the registered user.

The Patent Office

Trade Marks

Form TM51

Application by the registered proprietor of a Trade Mark or Sevice Mark for variation of entry of a registered user with regard to goods, services, conditions or restrictions

1 Registration number(s) and class number(s) of the marks which are covered by the Registered User number and for which application to vary the registration of that registered user is made:

Registration Number

Class Number

2 Full name of the Registered Proprietor of the mark(s) shown above

3 Registered User's Registration Number

RU

4 Full name of registered user whose registration as a user of the mark(s) shown in Part 1 above, is to be varied

Please turn over

If you do not have enough space please use a separate sheet of paper.

5 Describe the variation which is applied for

6 Agent's details (if any)
Name

Agent's Patent Office ADP
Number (if known)

Agent's own reference

7 Address of agent

Postcode

Signature

Date

19

Day Month

Year

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Name (BLOCK LETTERS)

Checklist

Have you attached

statement of grounds
together with written consent of
Registered User?

any continuation sheets
(if appropriate)?

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

No fee is payable for filing this form.

Attention is drawn to Rules 110 and 111 of the Trade Marks and Service Marks Rules 1986.

If you do not have enough space please use a separate sheet of paper.

The Patent Office

Trade Marks

Form TM52

Application for the cancellation of entry of a Registered User

1 Registration numbers and class numbers of the Marks, for which application to cancel the entry of a registered user is made

Registration Number	Class Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

2 Full name of Registered Proprietor of the Mark(s) shown above

3 Registered User's Registration Number

RU	<input type="text"/>
----	----------------------

4 Full name of the registered user whose registration as a user of the Mark(s) shown in Part 1 above is to be cancelled

5 Give brief details of the cancellation which is applied for

Please turn over

Mark correct box with an X.
Only ONE box should be
completed.

If you do not have enough space
please use a separate sheet of
paper

If the applicant for cancellation
is resident abroad a UK or Isle
of Man address **must** be given to
which all correspondence from the
Trade Marks Registry will be sent.

Please sign here ►

Attention is drawn to Rules 10 and
14 of the Trade Marks and Service
Marks Rules 1986.

<p>6 Status of the applicant for cancellation Is the applicant:</p> <p>the Registered Proprietor of the Marks shown at Part 1 overleaf? <input type="checkbox"/></p> <p>a Registered User of the Marks shown at Part 1 overleaf? <input type="checkbox"/></p> <p>other ? <input type="checkbox"/></p> <p>If other please give details</p>	
<p>7 Full name and address of person applying for cancellation</p>	
<p>8 Statement of grounds A statement setting out fully the grounds for this application MUST be attached to this form</p>	
<p>Agent's details (if any) Name</p>	
Agent's Patent Office ADP Number (if known)	<input type="text"/>
Agent's own reference	<input type="text"/>
<p>8 Address for Service</p>	
<p style="text-align: right;">Postcode</p>	
Signature	Date
	19
	Day Month Year
<p>Name (BLOCK LETTERS)</p>	
<p>Reminder Have you attached a statement setting out the grounds for this application? <input type="checkbox"/></p>	

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees please contact the Trade Marks Registry.

Attention is drawn to Rule 112 of the Trade Marks and Service Marks Rules 1986.

The Patent Office

Trade Marks

Form TM54

Notice of intention to intervene in proceedings for the variation or cancellation of an entry of a registered user of a Trade Mark or Service Mark

1 Registration Number of the Mark concerned

Class Number

2 Full name of the Registered Proprietor

3 Full name of the Registered User, whose Registration as a user of the Mark shown in Part 1 above is to be varied or cancelled

4 Registered User's Registration Number

RU	<input type="text"/>
----	----------------------

5 Date of Registrar's notification

Date

Day	Month	Year
		19

Please turn over

Set out the grounds for intervention.

If you do not have enough space please use a separate sheet of paper.

6 Statement of grounds for intervention

7 Agent's details (if any)
Name

Agent's Patent Office ADP
Number (if known)

Agent's own reference

If the intervener is resident abroad a UK or Isle of Man address must be given to which all correspondence from the Trade Marks Registry will be sent.

8 Address for service

Postcode

Signature

Date

19

Day Month

Year

Please sign here ►

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

Name (BLOCK LETTERS)

Form No TM 55

Your reference _____ Our reference _____ Date _____	For information on how and where to pay the renewal fee please turn over
--	--

1 Notice Before Removal of Mark from the Collection of Refused Marks

This is to remind you that if you intend to continue in the collection of refused marks the Mark shown below, for a further period of 14 years, you should complete Parts 2 and 4 and return the entire form with fee to the above address by the date shown below

Due date of renewal	Registration Number	Fee
_____	_____	_____

<p>2 Name and address of person paying the fee</p> Name _____ Address _____ _____ _____	<p>DECLARATION</p> I declare that I am directed by the proprietor of the above mentioned mark to pay the requested continuation fee
	Signature _____ Date: _____

3 Certificate of payment of Continuation Fee

This is to certify that the prescribed fee has been paid and

Mark No _____ is to be continued in the collection of refused marks for a period

of 14 years from _____

4 Please give the address to which this certificate should be sent

Patent Office
date stamp

**Please Do Not Detach This Certificate
The Patent Office Will Date And Return This Certificate When Continuation Is Effected**

Till receipt No. Till receipt date Fee taken Filing date Application No.

Please do not write above this line

Notes

Please type or write in BLOCK LETTERS using dark ink.

For details of current fees, please contact the Trade Marks Registry.

Attention is drawn to Rule 105 of the Trade Marks and Service Marks Rules 1986.

The Patent Office

Trade Marks

Form TM56

Request for a certificate of an entry in the Manchester Record of the Register of Trade Marks

1 Number of the Mark(s) for which a Certificate is required Class Number

2 Certificate requirements

If a certificate of registration is required, mark this box with an X otherwise set out below the particulars which the keeper is requested to certify:

If the Certificate is for use in legal proceedings please mark this box with an X

3 If the Certificate is for use in obtaining registration abroad please list the countries for which certificates are requested:

Please turn over

4 Name and address to which the certificate is to be sent	
Name	
Address	
Postcode	
Please sign here	Agent's own reference <input style="width: 100px; height: 15px;" type="text"/>
Signature	Date
	19
	Day Month Year
Name (BLOCK LETTERS)	

Attention is drawn to Rules 10 and 14 of the Trade Marks and Service Marks Rules 1986.

EXPLANATORY NOTE

(This Note is not part of the Rules.)

These Rules prescribe the forms referred to in the Trade Marks and Service Marks Rules 1986. They replace the forms prescribed in the Trade Marks Rules 1938 (S.R. & O. 1938/661), which have been revised and reduced in number.

SI 1986/1367
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