

**MINISTRY OF FOREIGN AFFAIRS, REGIONAL INTEGRATION AND INTERNATIONAL TRADE**

**THE INDUSTRIAL PROPERTY OFFICE OF MAURITIUS**

THE INDUSTRIAL PROPERTY ACT 2019

*(Regulation 110)*

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| **FORM GI 1**  **APPLICATION TO REGISTER A GEOGRAPHICAL INDICATION** | **For Official Use**  Date of Receipt:………………………...  C. B. No: ......................………………..  Application No.:MU/GI/……………….  Amount:….…………………………….. |
| **Applicant’s or Agent’s File reference:**  ………………………………………… |
| 1. **TITLE OF GEOGRAPHICAL INDICATION** | |
| ………………………………………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………………………… | |
| 1. **REPRESENTATION OF GEOGRAPHICAL INDICATION** | |
| *Note: Please ensure that all the elements in the GI are clear and legible* | |
| 1. **IDENTIFICATION OF THE GEOGRAPHICAL INDICATION** | |
| *Note: If the GI also contains or consists of a device, give a description of the device in words.*  ………………………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………………………… | |
| 1. **GEOGRAPHICAL AREA** | |
| *The following is the demarcation of the territory of the country, or region, or locality in that territory, to which the geographical indication applies, and from which the goods for which the geographical indication is used originate*  ………………………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………………………… | |
| 1. **PARTICULARS OF APPLICANT(S)** | |
| *Note: The data concerning each applicant must appear in this box or, if the space is insufficient, in the continuation sheet\**  Name:…………………………………………………………………………………………….......  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  Address:………………………………………………………………………………………............  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  Nationality: ……………………………………………………………………………………  Country of Residence or Principal Place of Business: …………………………………………  Tel. No: .……………………… Fax No:…………………………..  Email: ……………………………………………………………… | |
| 1. **AGENT *(if any*)** | |
| Name:………………………………………………………………………………………………  ………………………………………………………………………………………………………  Address:………………………………………………………………………………………………  ………………………………………………………………………………………………………  Tel. No.:………………………Fax No………………………  Email:………………………………………………………… | |
| 1. **ADDRESS FOR SERVICE (*if applicable)*** | |
| *Note: Full name and address in Mauritius to which correspondence is to be sent*  Name:…………………………………………………………………………………………….......  ………………………………………………………………………………………………………..  Address:………………………………………………………………………………………............  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  Tel. No.: ……………………Fax No.: ……………………Email: ………………………………... | |
| 1. **SPECIFICATION OF GOODS** | |
| *Note: Please use a separate sheet if necessary.*  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  ……………………………………………………………………………………………………….. | |
| 1. **CATEGORY OF GOODS (*as set out in the Sixth Schedule*)** | |
| Wine and spirit  Natural Products  Manufactured goods …Miscellaneous (*Please specify*) | |
| 1. **DESCRIPTION OF GOODS *(whichever is applicable)*** | |
| Colour:………………………………………………………………………………………………..  Shape:………………………………………………………………………………………………..  Texture:………………………………………………………………………………………………  Size:…………………………………………………………………………………………………..  Weight:……………………………………………………………………………………………….  Taste:………………………………………………………………………………………………… | |
| 1. **QUALITY, REPUTATION OR OTHER CHARACTERISTICS OF THE GOODS** | |
| The quality, reputation or other characteristics of the goods for which the geographical indication is used, and any conditions under which the indication may be used, are the following:  ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  Additional information accompanies this Form | |
| 1. **LINK BETWEEN THE GEOGRAPHICAL AREA AND A SPECIFIC QUALITY** ***(the reputation or other characteristics of the product e.g. Soil condition, climate characteristics, human factor, product reputation)*** | |
| ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  Additional information accompanies this Form | |
| 1. **STEPS IN PRODUCTION (*e.g: soil preparation, selection and treatment of seed, seed planting and field management, methods of fertilizing, harvesting, storing, etc.)*** | |
| ………………………………………………………………………………………………………..  ………………………………………………………………………………………………………..  Additional information accompanies this Form | |
| 1. **CODE OF PRACTICE** | |
| The Code of Practice (COP) accompanies this form: Yes  No  ***or*** will be furnished by ……………………………………………. . (date) | |
| 1. **PROOF OF ORIGIN** | |
| Proof that the name of the goods is protected in the country of origin accompanies this form:  Yes  No  ***or*** will be furnished by ……………………………………………. . (date) | |
| 1. **INTERNAL CONTROL PLAN** | |
| The Internal Control Plan relating to the Geographical Indication accompanies this form:  Yes  No  ***or*** will be furnished by ……………………………………………. . (date) | |
| 1. **CONTINUATION SHEET** | |
| Additional information is contained in continuation sheet: Yes  No | |
| 1. **DECLARATION** | |
| By Applicant  I, the undersigned, do hereby declare that the information furnished above is true to the best of my knowledge.  By Agent  I, the undersigned, do hereby declare that the information furnished above on behalf of the applicant is true to the best of my knowledge.  Date: ……………………………... Signature ………………………………………  \*\*(Applicant/ Agent)  \*Use this sheet for any additional information to be furnished  \*\*Delete whichever is not applicable | |
| ***Annex***  **CONTINUATION SHEET** | |