

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

**THE INDUSTRIAL PROPERTY OFFICE OF MAURITIUS**

THE INDUSTRIAL PROPERTY ACT 2019

|  |
| --- |
|  **FORM IP 7** **REQUEST TO CANCEL REGISTRATION** **OF** **PLANT VARIETIES/MARKS/GEOGRAPHICAL INDICATIONS**    |
| **1. NATURE OF REQUEST**  |
| *Tick as applicable*  Plant Varieties Mark Geographical Indication     |
| **2.DETAILS OF IP RIGHT**  |
|  Title/Mark Name: ……………………………………………………………………………  Application No.: …………………………………………………………………………….  Filing Date: ……………………………………………………………………………….….   |
| **3.PARTICULARS OF APPLICANT**  |
|  Name: ………………………………………………………………………………………………………… …………………………..……………………………………………………………………………………… ……………………………………..…………………………………………………………………………… Address: ……………………………………………………………………….................................................. …………………………………………………………………………………………………………………... ……………………………………………………………………………………………………………………. …………………………………………………………………………………………………………………... Tel. No: .……………………… Fax No:…………………………..  Email: ……………………………………………………………… ………………   |

|  |
| --- |
| **4. AGENT** (*if any*)  |
|  Name: …………………………………………………………………………………………….................... …………………………………………………………………………………………………………………. …………………………………………………………………………………………………………………. Address: ……………………………………………………………………….................................................. …………………………………………………………………………………………………………………...  …………………………………………………………………………………………………………………...  Tel. No.: ……………………Fax No……………………Email: …………………………...  |
| **5. 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: ……………………………  |
| **6. CANCELLATION DETAILS-PLANT VARIETIES & GEOGRAPHICAL INDICATIONS**  |
|  ……………………………………………………………………………………………………  ……………………………………………………………………………………………………  …………………………………………………………………………………………................  ……………………………………………………………………………………………………   |
| **7**. **CANCELLATION DETAILS FOR TRADEMARKS ONLY**  |
|  Goods and Services *(check as appropriate)*   Total Cancellation ………………….. *(The cancellation is to be recorded for all goods and services)*  Partial Cancellation ……………….... *(The cancellation affects only some of the goods and services)*    |
| **8. DETAILS OF PARTIAL CANCELLATION**  |
| (i*f the space is insufficient use a separate sheet)* Class/es to be fully cancelled: ………………………………………………………………….  ………………………………………………………………………………………………….  |
| Class/es to Class No. Goods/Services to Remain be partially cancelled: …………. ………………………………………………………………………   ………………………………………………………………………   …………………………………………………………………………………….  …………………………………………………………………………………….  …………. ………………………………………………………………………   ………………………………………………………………………  ……………………………………………………………………………………. ………………………………………………………………………    …………. ………………………………………………………………………  ………………………………………………………………………  …………………………………………………………………………………….   ………………………………………………………………………    |
| **9. 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)  \*Delete whichever is not applicable  |
|  No. of extra sheets attached to this form: sheet(s)  |