

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

**THE INDUSTRIAL PROPERTY OFFICE OF MAURITIUS**

THE INDUSTRIAL PROPERTY ACT 2019

 (Regulation 98(2)]

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| **REQUEST TO TRANSFORM INTERNATIONAL REGISTRATION INTO NATIONAL REGISTRATION**  |
| * + - 1. **DETAILS OF INTERNATIONAL REGISTRATION**
 |
| Representation of markInternational registration no. ………………………………………………………......International registration date ……………………….…………………………………Date of subsequent designation (*where applicable*)…………………………………Date of cancellation of International registration ……………………………………… |
| * + - 1. **MARK TYPE**
 |
| Please indicate whether the application is for\* – Trade mark Service mark 3-dimensional mark Collective mark Certification mark Other (please specify)  |

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| * + - 1. **SPECIFICATION OF GOODS/SERVICES\*\***
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| **Class no.** | **List of goods/services** |
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| * + - 1. **PRIORITY DETAILS (*if any*)**
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| Country ……………………………………………………......................................Application no. …………………………………………….....................................Date ………………………………………………………........................................Class number(s) for which priority is claimed ……………………………………….. |
| * + - 1. **PARTICULARS OF APPLICANT FOR REGISTRATION**
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| Name .....................................................................................................…………………………………………………………………………………..Address ..................................................................................................…………………………………………………………………………………………………………………………………………………………………………. |
| **6.** **AGENT (*if any*)** |
| Name ………………………………………………………………………………………..Address ………………………………..............................................................………………………………………………………………………………………..Telephone no. ................................. Fax no. ...................................Email address .......................................................................................... |
| **7. DECLARATION** |
| By person filing the formI, the undersigned, do hereby declare that the information furnished above is true to the best of my knowledge.By agentI, the undersigned, do hereby declare that –1. I have been duly authorised to act as an agent on behalf of the applicant;

(b) the information furnished above is true to the best of my knowledge.

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| --- | --- |
| ........................................Name of applicant/agent\*\*\* | .....................................Signature |
| ...................................Date |

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*\* Tick as appropriate*

*\*\* Please use a separate sheet if necessary*

*\*\*\* Delete as appropriate*

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