

TRADE MARKS ACT

Authorization of Agent

For Office use only

Reference number of person making the appointment* .....
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1. Appointment

The undersigned hereby appoints as is representative the person identified in item 3, below.

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2. Name(s) of Person(s) Making the Appointment †

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3. Representative

3.1 Name:

3.2 Address (including postal code and country):

Telephone number(s):  
(with the area code)

Telefacsimile number(s):  
(with the area code)

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\*The reference number allotted by the person making the appointment to this authorization of agent may be indicated in this space.

† If the person making the appointment is the applicant (or one of the applicants), the name to be indicated is that of that applicant, as indicated in the application(s) to which this authorization relates. If the said person is the holder (or one of the holders), the name to be indicated is that of that holder, as recorded in the register of marks. If the said person or an interested person other than an applicant or holder, the name to be indicated is the full name of that person or the name customarily used by that person.

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4. Application(s) and/or Registration(s) Concerned

This authorization of agent concerns:

- 4.1  all existing and future applications and/or registrations of the person making the appointment, subject to any exception indicated on an additional sheet.
- 4.2  the following application(s) and/or registration(s):
- 4.2.1 the application(s) concerning the following mark(s)\*:
- 4.2.2 the application(s) having the following application number(s) as well as any registration(s) resulting therefrom:
- 4.2.3 the registration(s) having the following registration number(s):
- 4.2.4  If the spaces under 4.2.1, or 4.2.2 or 4.2.3 are not sufficient, check this box and provide the information on an additional sheet.

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\* Complete this item if the authorization of agent is filed with the Office together with the application(s).

† Where the application number of an application has not yet been issued or is not known to the applicant or his representative, that application may be identified by furnishing either: (i) the provisional application number, if any, given by the Office; or (ii): a copy of the application; or (ii) a reproduction of the mark, accompanied by an indication of the date on which, to the best knowledge of the applicant or his representative, the application was received by the office and an identification number given to the application by the applicant or his representative.

5. Scope of the Authorization of Agent

5.1  Check this box if the representative has the right to act as representative for all purposes, including, where the person making the appointment is an applicant or a holder, the following purposes:

5.1.1  withdrawal of the application(s)

5.1.2  surrender of the registration(s)

5.2  Check this box if the representative does not have the right to act as representative for all purposes and indicate here or on an additional sheet purposes excluded from the powers of the representative:

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6. Signature

6.1 Name of natural person(s) who sign:

6.2 Dates of signatures:

6.3 Signatures:

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7. Additional Sheets and Attachments

Check this box if additional sheets and/or attachments are enclosed and indicate the total number of such sheets and/or attachments:

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