TM FORM -7

# Schedule II

**Industrial Property Regulations, 2001**

# Nu. 1000 per class

If the application relates to goods/ services in more than 1 class, the fee shall be Nu. 1000 x the number of classes.

# Application(s) request (s) the Registration of a mark as per following particulars.

**Section 26 Rule 37**

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| *General instructions** *This form should preferably be typewritten to assist in processing.*
* *Please fill the form carefully and note that minimal changes in the application are allowed after you have filed the application. Amendments may also need to be accompanied by fees.*
* *The form when completed should be filed with a prescribed fee as shown above.*
* *You may use a separate sheet if the space provided in the form is not enough.*
* *Upon filling up the form please remember to sign and date it.*
 |
| **1. Representation of the mark** *(Please ensure that the mark is clear and is no larger than the box provided below)*8cm x 8cm |
| **2. Indicate whether it is a Collective Mark**This application for registration concerns a collective markThe regulations governing the use of the collective mark are Attached |
| **3. Give a description of the mark and specify the features in the representation that is claimed.** |

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| **4. If the mark contains or consist of word(s) not being English word(s), provide the derivation of the word(s). If it is invented, state so. If it can be translated fill in No.5 below.** |
| **5. If the mark contains or consist of non-English word(s), provide the English translation and/or transliteration as follows.** |
| **6. If colours in a trademark are claimed, provide the description and specify the colours that you claim. (Note: Represented mark should be in colours)** |
| **7. If you wish to disclaim the right to exclusive use of any part of the mark, or limit the rights that you are claiming under the mark in any way, please indicate the limitations (e.g. colour limitation) or disclaimers** |
| **8. If this application claims priority (Tick Yes or No below), if yes provide the particulars of the claim in Annex A (i), (ii) at the end of this form**Yes *(Details in Annex A)* No |

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| Representation of word(s)/ characters |  |
| Language of word(s)/character |  |
| Translation of each word(s)/ characters and the word(s)/ characters taken together as a whole |  |
| Transliteration of characters(s) |  |

# Classes of goods/services for which this application is made –

Class number (s) as per Nice Classification \*

List of goods / services (**Please use Annex B** )

Where the goods and/or services belong to more than one category of the Nice Classification, they must be grouped according to the classes of that Classification. The number of each class must be indicated and the goods and/or services belonging to the same class must be grouped following the indication of the number of that class. Each group of goods or services must be presented in order of the classes of the Nice Classification. Where all the goods or services belong to one class, the number of that class must be indicated. (The latest edition of Nice classification shall be used)

# Applicant details

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| Full name |  |
| Address (including Pin Code and country) |  |
| Nationality |  |
| Telephone No (with area code) |  |
| Telefacsimile No (with area code) |  |
| Email: |  |
| * If body corporate, give corporate name and country of incorporation.
* In case of Partnership, give names and nationality of all partners, the trading style and nature of registration.
* In case of Trust, give the names of Managing Trustee.
* If there is more than 1 address, state the fact and give the address of the principal place of business.
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| Country of incorporation/constitution: |  |
| Proprietor code number (if applicable): |  |
| Trade Description **:** Merchant/Manufacturer/Service Provider (Tick applicable description) |

1. **Address for service in Bhutan /Agent Details (This column must be filled in when the applicant has neither a place of business or residence in Bhutan):**

|  |  |
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| Name of Agent/Attorney (if appropriate): |  |
| Addresses (including Pin/Postal code and Country): |  |
| Telephone No. (with area code) |  |
| Telefacsimile No.(with area code) |  |
| Agent’s code no. (if known) |  |
| Power of Attorney attached |  |
| General Power of Attorney already exists. SL. No. (If known) |  |
| Power of Attorney will be furnished at later date indicating the probable time. **(within 2 months)** |  |

1. **Additional representation of mark. Form 7A is attached*. (Please check & tick)***

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| **13. Declaration**The trademark is used in the course of trade, by the applicant or with his consent, in relation to the goods/services stated, or there is a bona fide intention that it will be so used. Please indicate the dates the trademark was used and possible dates that it will be used.Date of first use or intended use: Signature and Seal:Date (Day, Month, Year) of Signature:Name of the person who signs (in block letters):Whether signature is of Applicant or Agent: |

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| **Annex A****(i). Declaration claiming priority (Fill in this if only priority is claimed)**The applicant hereby claims priority, as per details given in item 8. Certified copy \* of the application(s), the priority of which is claimed, goods/services, together with translation where necessary –is attached **(please fill in Annex A (ii ) )**will be furnished within 3 months from the filing date of the present application **(please fill in Annex A (ii) separately and submit upon furnishing the certified copy of the priority application)**Signature and sealDate of SignatureName of the person who signsWhether signature is of Applicant or Agent\* Certified Copy means a copy of the application the priority of which is claimed certified as being in conformity with the original by the office which received the application. |

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| **Annex A****(ii). Fill in this if only priority is claimed***Note: If the space provided is insufficient, please continue on separate sheets and number them***Goods/services\*** |
|  | Are the goods/services in the priority application identical to the goods or services claimed in this application?**Yes No** |  |
| If “NO” please specify the goods/services as it appears in the priority application**Note: Please attach specification of priority claims in English** |  |
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| **Priority number:** |  |
| **Name of Country:** |  |
| **Date claimed** | Day………………. Month………………… Year…………………. |
| **Class number(s):** |  |

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| **Annex B Cont… from No. 9***Note: If the space provided is insufficient, please continue on separate sheets. Please specify the class number and then list it accordingly.***(i) List of goods/services relating to this application** |

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| **Form 7A****Industrial Property Regulations, 2001****(additional reproduction of mark to accompany application for Registration) Rule 38(2)**8 cm x 8 cm1. Additional representation of the mark. Please fix 1 representation of the mark corresponding exactly with the one in the application form. Representation of a large size may be folded but must be mounted on a linen or other suitable material and fixed in the space opposite.

You are required to send 3 copies of the representation of the mark each on a sepa-- rate Form 7A. All representations should be of uniform quality, clear and durable.1. Class(s) and specification of goods/services for which registration is sought.
2. Name of applicant and code (if known)
3. Name of agent and code (if known)
4. Language of the mark
5. If the mark contains or consist of non-English word(s), provide the derivation of word(s). If it is invented, state so. If it can be translated/transliterated, provide the English translation and/or transliteration as follows.
	1. Representation of word(s)/ characters
	2. Language of word(s)/character
	3. Translation of each word(s)/ characters and the word(s)/ characters taken together as a whole
	4. Transliteration of characters(s)

Signature of Applicant/Agent |

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Signature of Applicant/Agent |