INTELLECTUAL PROPERTY CORPORATION OF MALAYSIA TRADEMARKS ACT 2019

APPLICATION FOR RENEWAL OF REGISTRATION OF TRADEMARK AGENT

Note:

Please fill up all information require and attached related document if any.

1	Nature	Nature of the agent. Please select nature of applicant.								
	This request for renewal of registration of trademark agent is for:									
	🗆 Ind	Individual. Please provide all information.								
	🗆 Par	\Box Partnership and bodies corporate. Please skip item no. 5, 6 and 7								
2	Details	Details of the agent								
2	Details	Details of the agent								
	Name									
		N								
	Agent	. NO.								
3	Address and other information: (Please mark off box which is applicable)									
	□ No change from the existing record									
			e box below. Fee of RM20 (Fee Code TMB4) will be charged to change							
			of the registered agent together with this request. Various changes can be made							
		ler one payn								
	i.	i. Principal address/place of business (mandatory):								
	ii.	ii. Address for correspondences to be recorded in the Register, if any:								
	iii.	Telephone	No:							
	iv.	Email:								
4	ADDIT	IONAL INFO	RMATION to accompany this docuent, if any:							
г	ADDITIONAL INFORMATION to accompany uns uocuent, il any:									
		Yes, please	specify:							

5	Entitlement, please mark off at least one:						
0	\square a citizen of Malaysia						
	domiciled in Malaysia						
	a permanent resident of Malaysia						
6	 Qualification: Please mark off at least one if the agent only practice as an agent for at least 2 years: I am an advocate and solicitor and has not suspended from the Roll of Advocates and Solicitors I am a Patent agent and has not been struck off from the Register of Patent Agents; or 						
7	DECLARATION						
	□ I, the undersigned, do hereby declare that,						
	 all the information given above is true and correct; will be practicing as a trademark agent in a business registered in Malaysia 						
	iii am not an undischarged bankrupt;						
	iv have not been convicted of an offence involving fraud, dishonesty or any other offences under this Act;						
	v have attended related courses or seminar in IP; and						
	vi have paid tax on my income in Malaysia (proof of payment is as attached).						
	Signature:						
	Name of signatory:						
	Date:						
	Attention:						
	It is an offence under section 103 of the Trademarks Act 2019 to make or cause to be made a false entry to the Trademarks Office and that person may be liable to a fine not exceeding RM50,000 or to a term of imprisonment not exceeding 5 years or to both.						
8	Signatory of the requestor:						
	□ I, the undersigned, do hereby declare that,						
	i. I have been duly appointed and authorized to act on behalf of the partnership or bodies						
	corporate which is filing this form;						
	ii. the information furnished above on behalf of the partnership or bodies corporate filing this form is true; and						
	iii. the partnership or bodies corporate paid tax on their income in Malaysia (proof of payment is as attached).						
	Signature:						
	Name of signatory:						
	Official capacity of signatory:						
	(Examples: Authorized person, Director, Partner or Principal Officer of Applicant(s)/ Agent)						
	Date:						
Attention:							
	It is an offence under section 103 of the Trademarks Act 2019 to make or cause to be made false entry to the Trademarks Office and that person may be liable to a fine not exceeding RM50,000 or to a term of imprisonment not exceeding 5 years or to both.						

9	CONFIDENTIALITY OF DOCUMENT (Please tick off the box if applicable)										
	□ I want to apply for this document to be treated as confidential (Fee of RM 10 will be added to the application fee)										
10	SCANNING SHEET										
	(Self-calculation of payment for scanning services)										
	No	No Name of Document			No of Page(s)	Amount (RM2 for each page)					
	TOTA	L PAGES AND A	MOUNT TO PAY								
	☐ If more space is necessary, tick off this box and use an additional sheet										
11	PAYMENT DETAILS [Note: This will depend on the method of payment accepted.]										
	\Box Cash		🗆 Cheque (Cheque No.)								
	□ FPX		🗆 Local Order (LO No.)								
		Credit Card	□ Other, please specify:								