

Fee Code  
**TMA2A**  
**TMA2B**  
**TMA2C**

**INTELLECTUAL PROPERTY CORPORATION OF MALAYSIA  
TRADEMARKS ACT 2019  
APPLICATION FOR REGISTRATION OF TRADEMARK**

PAS Reference No. (if any):

Fee applicable for this request is for each class. Please indicate number of classes requested

Application for registration of trademark – by adopting from pre-approved list (Fee Code **TMA2A**)  
Application for registration of trademark – without adopting from pre-approved list (Fee Code **TMA2B**)  
Series of trademark (Fee Code **TMA2C**)

**1** **APPLICANT** [If there is more than one applicant mark off this box and fill additional information]:

a	<b>Applicant's Name:</b> (If partnership, please provide names of the partners)							
b	<b>Applicant type</b> (Specify whether Person/individual, body corporate, partnership, LLP, association/body authority or others)							
c	<b>Identity Card No. /Passport No.</b> (for individual) or <b>Company Registration No.</b> (for company or businesses registered in Malaysia only)							
d	<b>Address of applicant:</b> <ul style="list-style-type: none"> <li>• If the address is not within Malaysia, you must also complete section 2 below</li> <li>• If you want to have a different address for service, please also complete item 3</li> </ul>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td></tr> <tr> <td style="width: 50%;"><b>Postcode:</b></td> <td style="width: 50%;"><b>Town:</b></td> </tr> <tr> <td colspan="2"><b>State/Country:</b></td> </tr> </table>			<b>Postcode:</b>	<b>Town:</b>	<b>State/Country:</b>	
<b>Postcode:</b>	<b>Town:</b>							
<b>State/Country:</b>								
e	<b>Telephone No.</b> (For Malaysian applicant only)							
f	<b>Mode of Correspondence</b>	<input type="checkbox"/> (Mark off this box if you would like us to correspond with you using our Electronic Filing System services. You must have a registered ID)						
g	<b>Applicant's Reference No.</b> (If any and no							

	registered agent is appointed)	
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**2 AGENT** (If registered agent is authorized and appointed, Form TMR7 must be filed with this form)

a	Name:	
b	Agent No. (if known):	
c	Agent Reference No.:	

**3 ADDRESS FOR SERVICES OF THE APPLICANT** (If registered agent is not appointed and applicant wishes to have another address, other than stated in Section 1(d), Form TMR7 must be filed with this form)

<b>Postcode:</b>	<b>Town:</b>
<b>State/Country:</b>	

**4 TYPE OF TRADEMARK**

- i.  Trademark
- ii.  Collective Mark. Please file rule of collective mark (Fee code TMA3 – RM300 each class)
- iii.  Certification Mark. Please file rule of certification mark (Fee code TMA3 – RM300 each class)

**5 NATURE OF TRADEMARK** [Mark off one box only. You may mark more boxes if item no. xii is applicable]

<input type="checkbox"/>	i <b>Word</b>	Please type the trademark here:
<input type="checkbox"/>	ii <b>Device</b>	Please attached or affixed the trademark in the box in Section 7
<input type="checkbox"/>	iii <b>Combination of word and device</b>	Please type the word trademark here and attached or affixed the trademark in the box in Section 7
<input type="checkbox"/>	iv <b>Stylized word</b>	Please type the word trademark here and attached or affixed the trademark in the box in Section 7

<input type="checkbox"/>	v <b>Shape of goods or their packaging</b>	Please fill the description of the trademark in Section 6 and attached or affixed the trademark in the box in Section 7 (file format jpeg and PNG only)  Please indicate the number of views in the box. <input type="text"/> The maximum number of images per trademark is 6
<input type="checkbox"/>	vi <b>Colour</b>	Please provide pantone code here and attached or affixed the trademark in the box in Section 7 (file format jpeg and PNG only)
<input type="checkbox"/>	vii <b>Sound</b>	Please fill up the description of the trademark in Section 6 and provide MP3 of the sound (file format mp3 not exceeding 5MB)
<input type="checkbox"/>	viii <b>Scent</b>	Please fill up the description of the trademark in Section 6
<input type="checkbox"/>	ix <b>Hologram</b>	Please fill the description of the trademark in Section 6 and attached or affixed the trademark in the box in Section 7 (file format mp4 only not exceeding 20MB)
<input type="checkbox"/>	x <b>Positioning</b>	Please fill the description of the trademark in Section 6 and attached or affixed the trademark in the box in Section 7 (file format jpeg and PNG only)
<input type="checkbox"/>	xi <b>Sequence of Motion</b>	Please fill the description of the trademark in Section 6 and attached or affixed the trademark in the box in Section 7 (file format mp4 only not exceeding 20MB)
<input type="checkbox"/>	xii <b>Any combination of the above (please mark also the nature of trademark to be combined)</b>	Please provide necessary information as required above.

**6 DESCRIPTION OF THE TRADEMARK** (Is required if the nature of trademark is shape of goods or their packaging, colour, sound, scent, hologram, positioning, sequence of motion)

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**7**

**THE TRADEMARK** The representation of trademark must be firmly attached or affixed in the provided area below. Please mark off which is applicable.

- Representation of the trademark is in black & white (please attach a black and white representation of the mark)
- Representation of the trademark is in colour. If colour(s) is/are claimed. (please attach a representation of the mark in colour)

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If the application is for a series trademark, please indicate number of series in the box provided. For series trademark, the maximum number is 6 only.

**Note:**

The size of the representation of the trademark or graphic representation of the sign shall be more than 2cm x 2cm and less than 20cm x 20cm.

**8**

**OTHERS - Non-Roman character and non-national language or English**

If the trademark contains or consists of a word or words in non-Roman character or in a language other than the national language or English, please provide the following information:

<b>Particulars</b>	
<b>NON-NATIONAL LANGUAGE OR ENGLISH / NON-ROMAN CHARACTER</b>	
a	Language of the word or words / Character or script of the trademark:
b	Translation of the trademark into national language or English:
c	Transliteration: (pronunciation of the character/script):
c	Please mark off this box if the word(s) contained in the trademark have no meaning and cannot be translated

**9**

**DISCLAIMER** (If you want to voluntarily disclaim any rights to any specified element(s) or word(s) of the trademark, please indicate here)

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**10****PRIORITY CLAIMED** (If more space is necessary, tick this box and use an additional sheet): 

If the priority of more than one application is claimed, please indicate the priority details of all the earlier filings.

Country or Office	Priority Number	Date of priority to be claimed	Class	Goods/Services (Please tick one of the boxes where applicable)
				<input type="checkbox"/> All goods and/or services <input type="checkbox"/> Some of goods and/or services Please specify:
				<input type="checkbox"/> All goods and/or services <input type="checkbox"/> Some of goods and/or services Please specify:

**11****GOODS AND SERVICES**

Indicate the Nice Classification (latest edition) to which the goods or services belong to. You may consult the Nice Classification for the list of terms accepted by Malaysia.

If more space is necessary, mark off this box and use an additional sheet: 

Please use "Times New Roman" or "Arial", 12 points. Use a semicolon (;) to separate goods and services.

Pre-approved list is available on [www.myipo.gov.my](http://www.myipo.gov.my)

If the space provided is insufficient, continue on a separate sheet and firmly attached to this form.

Adopting from the pre-approved list	Class	Goods or Services
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Yes <input type="checkbox"/> No		

**12**

**DATE OF FIRST USE**

State the date of first use in Malaysia, if this is known. (dd/mm/yyyy):

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**13**

**DECLARATION AND SIGNATURE**

**By Person Filing the Form**

The applicant claims to be the bona fide proprietor of the trademark and he is:

- (a) using or intends to use the trademark in the course of trade; or
- (b) authorized or intend to authorize another person to use the trademark in the course of trade.

And I, the undersigned, do hereby declare that the information furnished above is true to the best of my knowledge.

**By Agent** (An agent signing this document on behalf of the applicant shall satisfy himself as to the truth of the declaration)

I, the undersigned, do hereby declare that:

- i I have been duly appointed and authorized to act as an agent on behalf of the person(s) filing this form.
- ii the information furnished above on behalf of the person(s) filing this form is true to the best of the applicant's knowledge.
- iii I have been authorized to inform that the applicant is the bona fide proprietor of the trademark whose registration is applied for that the application is made in good faith and that he is /they are entitled to be registered as the proprietor of the trademark.

I understand and accept that I cannot make any substantive changes to the trademark(s) applied for or add more goods or services once the application is submitted. I also accept that any application fees paid are non-refundable (even if the application is not acceptable).

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 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.**

**14**

**CONFIDENTIALITY OF DOCUMENT** (Please mark off the box if applicable)

I want this document to be treated as confidential (Fee of RM 10 will be added to the application fee)

**15****SCANNING SHEET**

(Self-calculation for payment of scanning services)

No	Name of Document	No of Page(s)	Amount (RM2 for each page)
TOTAL PAGES AND AMOUNT TO PAY			

 If the space provided is insufficient, continue on a separate sheet and firmly attached to this form
**16****PAYMENT DETAILS** [Note: This will depend on the method of payment accepted.] Cash Cheque (Cheque No.  FPX Local Order LO No.  Credit Card Other, please specify: