

Form TM 4

Application for Registry Entry and Certificate of Registration

Fee(s): \$269.00 plus \$20.00 per each additional mark in series

\$269.00 plus \$139.00 for each additional class (multi-class entries)

\$68.00 for additional Certificate of Registration

\$82.00 for additional Certificate of Registration for series

Use this form to file your application for the registry entry of a trade mark. 1. Full Name of Owner **Full Address** Postcode 2. Full Name of Agent **Full Address** Postcode **Email address Telephone**

Reg:	No Cl	hange of Agent ge Agent (Please provide Authorization of Agent – TM 13)
	TM Nos.	Be 128-10 (1
4.		y and Certificate of Registration: (Series – Please state number): irst mark plus \$20.00 for each additional mark in the series
		No Change of Agent Change Agent (Please provide Authorization of Agent – TM 13)
	TM Nos. and	number of duplicate copies requested
5.	Multi-Class F	Entries: \$139.00 each
		No Change of Agent Change Agent (Please provide Authorization of Agent – TM 13)
	TM Nos.	
6.	Additional Ce (\$82.00 for se	ertificate of Registration: \$68.00 eries)
		No Change of Agent Change Agent (Please provide Authorization of Agent – TM 13)
	TM Nos.	

	7. Number of Continuation Sheets attached	
8.	Signature Name (BLOCK CAPITALS) Date	
9.	Your Reference Complete if you would like us to quote this in communications with you, otherwise leave blank	
Yo	our Contact details should we have a query	
Na	ame	
En	nail	
Ph	none	
Ch	hecklist	
Ple	ease make sure you have remembered to:	
	Sign and date the form	
	Provide the Trade Mark Number(s)	
	Enclose the fee	
En	nail submissions with direct deposits to:	Post forms with cheques only to:
	intellectualproperty@gov.bm	Intellectual Property Office % Registry General Government Administration Building, 4 th Floor 30 Parliament Street Hamilton HM 12 Bermuda
	ees and Payment Method	
	e will only process the form with this sect	ion completed (one form per payment)
Total fee paying (\$)		

Y our p	bayment reference						
	Payments by cheque, cash, debit or credit cards or revenue stamps can be made in office by 3:15PM.						
	Cheque – make payable to 'Accountant General'						
	Bank Transfer / Direct Deposit						
	Beneficiary Bank: Beneficiary Name: HSBC Bank of Bermuda Limited, 37 Front Street, Hamilton 11, Bermuda GOVERNMENT OF BERMUDA – Registry General						
	Beneficiary Account Num Beneficiary Account Num		10-125250-001 10-125250-501	Bermuda Dollar Account US Dollar Account			
	Reference – Trade Mark r						

CONTINUATION PAGE

ке	Registry Entry: \$269 each					
		No Change of Agent				
		Change Agent (Please provide Authorization of Agent – TM 13)				
	TM Nos.					
		Series – Please state number):				
\$20	59 for first mar	k plus \$20 for each additional mark in the series				
		No Change of Agent				
		Change Agent (Please provide Authorization of Agent – TM 13)				
	TM Nos.					
Re	gistry Entry: \$2	269 each				
		No Change of Agent				
		Change Agent (Please provide Authorization of Agent – TM 13)				
	TM Nos.					
		Series – Please state number): k plus \$20 for each additional mark in the series				
		No Change of Agent				
		Change Agent (Please provide Authorization of Agent – TM 13)				
	TM Nos.					