Application for registration in the

**Register of Trade Mark Agents**

**Application is hereby made for registration in the Register of Trade**

**Mark Agents under Section 86 (1) of the Trade Marks Act, 1996 and the Trade Mark Rules, 1996**

###  NOTE:

* Sections 1 and 3 are to be completed in the case of an INDIVIDUAL **or** a MEMBER OF A PARTNERSHIP wishing to be registered in the Register of Trade Mark Agents
* Sections 2 and 3 are to be completed in the case of a PARTNERSHIP or COMPANY wishing to be registered in the Register of Trade Mark Agents.
* Per Rule 53 (b) the Trade Mark Rules, 1996 the Register of Trade Mark Agents shall include the date of registration and, in the case of a partnership, body corporate or unincorporated body, the business name and address thereof and the full name and home address of each director, manager, partner or employee registered as a trade mark agent in the State and in the case of an individual, the full name, the business name (if any), nationality and home and business address of the applicant together with such particulars of the applicant’s qualifications for entry, and such other particulars as the Controller may require.

### SECTION 1 Application by an Individual or Member of a Partnership or Company

|  |  |
| --- | --- |
| Name: |  |
| Private Address: |  |
|  |
|  |
|  |
| Nationality: |  |
| Telephone: |  |
| Email: |  |
| Date of Birth: |  |
| Name in which it is proposed to carry on business as a Trade Mark Agent |  |
| Address at which it is proposed to carry on business as a Trade Mark Agent |  |

**If applicant is a person, who is a member of a partnership or company, state the full name and the address of the partnership or company.**

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
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|  |
|  |
| Email: |  |

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| --- |
| Educational and Professional Qualifications |
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| --- | --- |
| Please insert particulars of your educational and professional qualificationsas per Rule 51(4). |  |
| *This application must be accompanied by copies of the relevant certificates, diplomas, etc. evidencing the achievement of the qualifications indicated.* |
| ***Additional pages may be enclosed if required*** |

**Section 51(7) of the Trade Marks Act states:***The Board may, however, waive or vary any of the requirements specified in subparagraphs (a) or (b) of paragraph (4) of Rule 51, if it is otherwise satisfied in the light of the educational and professional qualifications which the applicant possesses, that the applicant is fit to perform the professional duties of a trade mark agent.*If you have not successfully completed the Irish Law & Practice of Trade Marks examination and want your application to be based on this waiver please indicate by ticking the box and supply all evidence of knowledge and experience of Irish Trade Mark Law & Practice with this form. |

### SECTION 2 Application by a Partnership or Company

**Insert the full business name or style and address under which the partnership or company proposes to carry on business as a Trade Mark Agent**

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
|  |
|  |
|  |
| Email: |  |

**Please provide details of each director, manager, partner and employee of the Partnership or Company who is registered as a Trade Mark Agent in the State**

|  |  |
| --- | --- |
| Name: |  |
| Private Address: |  |
|  |
|  |
| Nationality: |  |
| Date of Birth: |  |
| Date of entry in the Register |  |

|  |  |
| --- | --- |
| Name: |  |
| Private Address: |  |
|  |
|  |
| Nationality: |  |
| Date of Birth: |  |
| Date of entry in the Register  |  |

|  |  |
| --- | --- |
| Name: |  |
| Private Address: |  |
|  |
|  |
| Nationality: |  |
| Date of Birth: |  |
| Date of entry in the Register  |  |

1. **This application must be accompanied by a copy of a certificate of incorporation, an entry in a relevant register or other proof of legal personality.**
2. **This application must be accompanied by the full particulars of the education and professional qualifications of each director, manager, partner and employee who is registered as a trade mark agent in the State.**

**SECTION 3 Fee payable under Item TM33 of the Patents and Trade Marks (Fees) Rules 2001 (as amended)**

|  |  |
| --- | --- |
| On application for registration in the Register of Trade Mark Agents Rule 51(1) | €50.00 |

**Method of Payment Tick only one box**

Credit Card (please ring Office directly

 to make payment)

Electronic Funds Transfer

**If you want to pay by Electronic Funds Transfer, our bank account details are as follows:**

|  |  |
| --- | --- |
| A/C Number: | 80012459 |
|  |  |
| Sort Code: |  951990 |
|  |  |
| IBAN: | IE94DABA95199080012459 |
|  |  |
| BIC: | DABAIE2D |

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|  |  |
| --- | --- |
| \*Signature of Applicant: |  |
| Name in Block Capitals: |  |
| Capacity: |  |
| Date: |  |

\**If signed for or on behalf of a partnership or body corporate state name in block capitals of person signing.* *The capacity of the signatory must also be stated*. |
|  |