



INDUSTRIAL DESIGNS ACT, 2001

APPLICATION TO REGISTER DETAILS OF AN ASSIGNMENT

1. Name and address of Current Proprietor(s):

Name	
Address	
Telephone	
Email	

Name	
Address	
Telephone	
Email	

Should you require additional space, an extra sheet may be used **provided** that it is attached to the form when filed.

2. Name and Address of Assignee/New Proprietor(s):

Name	
Address	
Telephone	
Email	

Name	
Address	
Telephone	
Email	

Should you require additional space, an extra sheet may be used **provided** that it is attached to the form when filed.

3. Design Number(s):

Should you require additional space, an extra sheet may be used **provided** that it is attached to the form when filed.

4. Where the Assignment is in respect of any right in the Design, please describe the right assigned:

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5. Name and date of the document on which the interest of the assignee/new proprietor is based (Please enclose original or certified copy):

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6. Legal Representative (Trade Mark Agent, Solicitor or other qualified person authorised to act on behalf of the Applicant (s) in all proceedings connected with this application)

Name	
Address	
Telephone	
Email	
Reference No. (Optional)	

Please tick if this address is to be recorded on the register as the address for service

7. Address for Service of Assignee/New Proprietor (within the EEA, to which all correspondence is to be sent)

If different to address at 6	
Name	
Address	
Telephone	
Email	

Please tick if this address is to be recorded on the register as the address for service

8. 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:

Bank Sort Code:	98-58-80
Bank Name:	Ulster Bank 27 High Street Kilkenny Ireland
Account Number:	11124739
Account Name:	Patents Office
Reference:	Quote your name, Design number and fee item code D4(a)
Swift/BIC Code:	ULSBIE2D
IBAN Number:	IE05ULSB98588011124739

9. Check List

Items accompanying this application

Original or Certified Copy of Document		<input type="text"/>
Number of Additional sheets if any accompanying the application		<input type="text"/>
Application Fee €60.00	€	<input type="text"/>
Fee for each additional mark €6.00 each	€	<input type="text"/>
Total fees	€	<input type="text"/>

Signature by or on behalf of Assignee/New Proprietor: _____

Name and Status of Signatory: _____

Date: _____