

## RENEWAL OF A TRADEMARK



### APPLICANT (NAME AND FIRST NAME OR DENOMINATION AND LEGAL STRUCTURE)

Name : \_\_\_\_\_

Address : \_\_\_\_\_

Postal code and Place : \_\_\_\_\_

Country : \_\_\_\_\_

E-mail address : \_\_\_\_\_

### REPRESENTATIVE (IF ANY)

Name : \_\_\_\_\_

Address : \_\_\_\_\_

No. of representative : \_\_\_\_\_

E-mail address : \_\_\_\_\_

### TRADEMARK

Registration number : \_\_\_\_\_

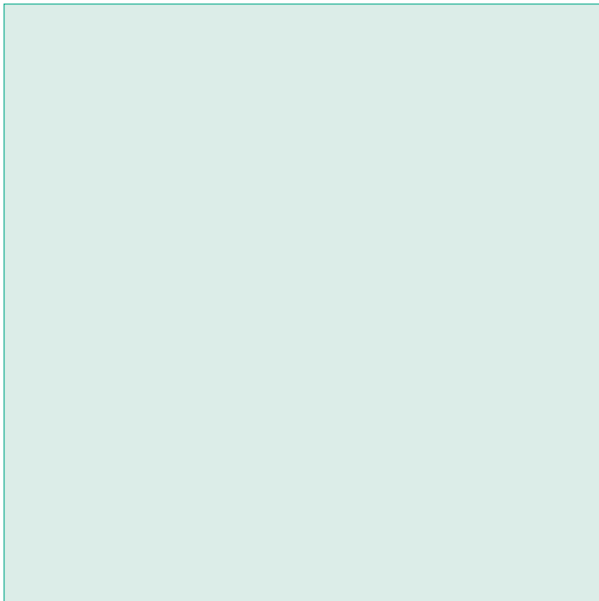
Partial renewal of goods and services  Yes  No

If so, state number of classes of goods and services here : \_\_\_\_\_

Color(s) : \_\_\_\_\_

### TRADEMARK

*If word mark indicate clearly in the square. If image place the reproduction of the mark in the square.*



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### AMOUNT OF FEES RENEWAL

Basic amount Individual mark	NAf
Basic amount collective mark	NAf
Supplementary fee per class of goods & services higher than the third	NAf
Additional right after expiry date	NAf
Supplementary fees for	NAf
Accelerated procedure	NAf
<b>Total</b>	<b>NAf</b>

### SPECIFICATION OF GOODS AND SERVICES OF TRADEMARK ARRANGED IN SEQUENCE OF CLASSES:

### METHOD OF PAYMENT (EVIDENCE ENCLOSED)

Cash     Swipe     Deposit Bank account    Transfer:     MCB **130211603**     BDC **17193701**

Curaçao, \_\_\_\_\_

Signature : \_\_\_\_\_

In capacity of : \_\_\_\_\_

Name : \_\_\_\_\_

### FOR BUREAU FOR INTELLECTUAL PROPERTY USE ONLY

Registration number : \_\_\_\_\_ VD-number: \_\_\_\_\_

Expiration date : \_\_\_\_\_ VD-date : \_\_\_\_\_

Receipt number : \_\_\_\_\_ Paraph : \_\_\_\_\_ Date : \_\_\_\_\_