REQUEST FOR CANCELLATION OF A TRADEMARK OR LIMITATION OF GOODS AND/OR SERVICES OF A REGISTRATION



If the space on the form is insufficient, please list the relevant information on an attachment

Name of applicant/Trademark attorne	у :		
Address	:		
P.O. Box number	:		
Country	:		
E-mail address	:		
Telephone number	:		
Registration number(s)	:		
Trademark(s)	:		
TRADEMARK HOLDER			
Name	:		
Address	:		
Postcode and Place	:		
Country	:		
 □ Cancelation of the registration □ At the request of the trademark hol □ Limitation of goods and/or services New List: 		□ By court order	
Curação,			
Signature:		Name:	