RENEWAL OF A TRADEMARK



APPLICANT (NAME AND FIRST NAME OR DENOMINATION AND LEGAL STRUCTURE)		
Name	:	
Address	:	
Postal code and Place	<u> </u>	
Country	:	
E-mail address	:	
REPRESENTATIVE (IF	ANY)	
Name	:	
Address	:	
No. of representative	:	
E-mail address	:	
TRADEMARK		
Registration number	:	
Partial renewal of goo	ds and services \square Yes \square No	
If so, state number of	classes of goods and services here :	
Color(s)		
TRADEMARK		
If word mark indicate of the reproduction of the	clearly in the square. If image place e mark in the square.	

RENEWAL OF A TRADEMARK



AMOUNT OF FEES RENEWAL	
Basic amount Individual mark	Cg
Basic amount collective mark	Cg
Supplementary fee per class of goods & services higher than	
Additional right after expiry date	Cg
Supplementary fees for	Cg
Accelareted procedure	Cg
Total	Cg
METHOD OF PAYMENT (EVIDENCE ENCLOSED)	
☐ Cash ☐ Swipe ☐ Deposit Bank account	Transfer: MCB 130211603 BDC 17193701
	Signature : Name :
FOR BUREAU FOR INTELLECTUAL PROPERTY USE ONLY	
Registration number :	VD-number:
Expiration date :	VD-date :