

This form is suitable for use in the following countries: UGANDA

SOUTH AFRICA, BOPHUTHATSWANA, SWAZILAND, ETHIOPIA, GAMBIA, GHANA, KENYA, LIBERIA, MALAWI, MAURITIUS, NIGERIA, SEYCHELLES, SIERA LEONE, SOMALIA, NAMIBIA, ST. HELENA, TANZANIA, TRANSKEI, UGANDA, VENDA, ZANZIBAR AND ZIMBABWE

**AUTHORIZATION OF AGENT**

(1) I/we,

have appointed

of

to act as my/our agent for the registration of trade mark no.            in class

and request that all notices, requisitions and communications relating thereto may be sent to such agent at the above address. I/We hereby revoke all previous authorisations, if any, in respect of the same matter or proceeding.

(2) I/We hereby declare that I am/we are

I/We also authorize the said

to complete the entry of an address for service as part of any registration obtained under the above authorization.

Dated this            day of            .

(3)    \_\_\_\_\_  
Name :  
Title :  
The Registrar  
The Trade Marks Office,

.....

Notes:

- (1) Full names of all partners in a firm must be inserted and the kind and country of incorporation of bodies corporate.
- (2) Nationality
- (3) Signature of Person appointing the Agent PLEASE STATE DESIGNATION OF SIGNATORY.