**FORM TM 18**

**BRUNEI DARUSSALAM**

**TRADEMARK ACT**

**APPLICATION FOR THE REVOCATION, INVALIDATION OR**

**RECTIFICATION OF A REGISTRATION**

**Under sections 47, 48 and 61 and rule 55(1)**

*Please refer to notes for guidance on completing this form*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Give details of the registration this will affect | | Number | | Class |
| 1. Is this request for – 2. Revocation *or* 3. Rectification *or* 4. Declaration of invalidity   *(indicate as appropriate. You may use this form for more than one category of request)* | |  | | |
| 1. Full name and address of registered proprietor | |  | | |
| 1. Full name and address of applicant for revocation, rectification or invalidity\*   *(delete where appropriate)* |  | | | |
| 1. Name of agent (*if appropriate)*   ‘Address for service’ of the applicant for revocation/declaration of invalidity / rectification\*  *[See note (h)]*  *(delete where appropriate)* | |  | | |
| Attach a statement of grounds on which the application is made | |  | | |
|  | | **Declaration**  *I declare that to the best of my knowledge there is no action concerning the registration pending in the Courts* | | |
| Signature: | |  | | |
| Name (*block capitals)* | |  | | |
| State number of sheets attached to this form | |  |  | |

**FORM TM 18**

*Specific notes*

1. *This form is used to request the revocation, invalidation or rectification of a registered trade mark.*
2. *If proceedings concerning the trade mark are waiting to be dealt with in court, you must apply to the court.*
3. *The Registrar may refer an application for revocation, rectification or declaration of invalidity to the court at any stage.*
4. *The form must be accompanied by a statement of the grounds of your application.*

*General notes*

1. *Complete this form in Capital letters or type it.*
2. *If there is not enough space for your answer to any section of this form, use separate sheets. Number each one and write on the form how many extra sheets you have used.*
3. *Once you have completed this form you must remember to sign and date it.*
4. *If your address for service is different from your agent, then please give us full details of both.*
5. *If you need help or have any questions, please contact the Registry of Trade Marks at*

*+673 2380966.*