

MADRID AGREEMENT AND PROTOCOL CONCERNING THE  
INTERNATIONAL REGISTRATION OF MARKS

**REQUEST FOR THE RECORDING OF A  
RESTRICTION OF THE HOLDER'S RIGHT OF DISPOSAL**

(Rule 20 of the Common Regulations)

**IMPORTANT**

1. This form must be presented to the International Bureau:
  - (a) by the recorded holder or by the Office of the Contracting Party of the recorded holder, in which case the restriction may concern all or some of the designated Contracting Parties;
  - (b) by the Office of a designated Contracting Party, in which case the restriction may concern only the territory of the said designated Contracting Party.
2. This form may be used to request the recording of a restriction of the holder's right of disposal in respect of several international registrations of the same holder, provided that the Contracting Parties in respect of which the international registration is restricted are the same for all the international registrations concerned.



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## RESTRICTION OF THE HOLDER'S RIGHT OF DISPOSAL

For use by the holder or Office

Holder's reference: .....

Office's reference: .....

### 1 INTERNATIONAL REGISTRATION NUMBER(S)

.....

.....

.....

.....

.....

### 2 NAME OF THE HOLDER (as recorded in the International Register)

.....

### 3 CONTRACTING PARTY(IES) CONCERNED (check either (a) or (b))

- (a)  The restriction of the holder's right of disposal is to be recorded for **all** the designated Contracting Parties;
- (b)  The restriction of the holder's right of disposal is to be recorded for **some only** of the designated Contracting Parties. Indicate below, by checking the corresponding box(es), those Contracting Parties:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> <b>AG</b> Antigua and Barbuda    | <input type="checkbox"/> <b>DZ</b> Algeria                                  | <input type="checkbox"/> <b>KR</b> Republic of Korea                        | <input type="checkbox"/> <b>RO</b> Romania                  |
| <input type="checkbox"/> <b>AL</b> Albania                | <input type="checkbox"/> <b>EE</b> Estonia                                  | <input type="checkbox"/> <b>KZ</b> Kazakhstan                               | <input type="checkbox"/> <b>RS</b> Serbia                   |
| <input type="checkbox"/> <b>AM</b> Armenia                | <input type="checkbox"/> <b>EG</b> Egypt                                    | <input type="checkbox"/> <b>LI</b> Liechtenstein                            | <input type="checkbox"/> <b>RU</b> Russian Federation       |
| <input type="checkbox"/> <b>AN</b> Netherlands Antilles   | <input type="checkbox"/> <b>EM</b> European Union                           | <input type="checkbox"/> <b>LR</b> Liberia                                  | <input type="checkbox"/> <b>SD</b> Sudan                    |
| <input type="checkbox"/> <b>AT</b> Austria                | <input type="checkbox"/> <b>ES</b> Spain                                    | <input type="checkbox"/> <b>LS</b> Lesotho                                  | <input type="checkbox"/> <b>SE</b> Sweden                   |
| <input type="checkbox"/> <b>AU</b> Australia              | <input type="checkbox"/> <b>FI</b> Finland                                  | <input type="checkbox"/> <b>LT</b> Lithuania                                | <input type="checkbox"/> <b>SG</b> Singapore                |
| <input type="checkbox"/> <b>AZ</b> Azerbaijan             | <input type="checkbox"/> <b>FR</b> France                                   | <input type="checkbox"/> <b>LV</b> Latvia                                   | <input type="checkbox"/> <b>SI</b> Slovenia                 |
| <input type="checkbox"/> <b>BA</b> Bosnia and Herzegovina | <input type="checkbox"/> <b>GB</b> United Kingdom                           | <input type="checkbox"/> <b>MA</b> Morocco                                  | <input type="checkbox"/> <b>SK</b> Slovakia                 |
| <input type="checkbox"/> <b>BG</b> Bulgaria               | <input type="checkbox"/> <b>GE</b> Georgia                                  | <input type="checkbox"/> <b>MC</b> Monaco                                   | <input type="checkbox"/> <b>SL</b> Sierra Leone             |
| <input type="checkbox"/> <b>BH</b> Bahrain                | <input type="checkbox"/> <b>GH</b> Ghana                                    | <input type="checkbox"/> <b>MD</b> Republic of Moldova                      | <input type="checkbox"/> <b>SM</b> San-Marino               |
| <input type="checkbox"/> <b>BT</b> Bhutan                 | <input type="checkbox"/> <b>GR</b> Greece                                   | <input type="checkbox"/> <b>ME</b> Montenegro                               | <input type="checkbox"/> <b>ST</b> Sao Tome and Principe    |
| <input type="checkbox"/> <b>BW</b> Botswana               | <input type="checkbox"/> <b>HR</b> Croatia                                  | <input type="checkbox"/> <b>MG</b> Madagascar                               | <input type="checkbox"/> <b>SY</b> Syrian Arab Republic     |
| <input type="checkbox"/> <b>BX</b> Benelux                | <input type="checkbox"/> <b>HU</b> Hungary                                  | <input type="checkbox"/> <b>MK</b> The former Yugoslav<br>Rep. of Macedonia | <input type="checkbox"/> <b>SZ</b> Swaziland                |
| <input type="checkbox"/> <b>BY</b> Belarus                | <input type="checkbox"/> <b>IE</b> Ireland                                  | <input type="checkbox"/> <b>MN</b> Mongolia                                 | <input type="checkbox"/> <b>TJ</b> Tajikistan               |
| <input type="checkbox"/> <b>CH</b> Switzerland            | <input type="checkbox"/> <b>IR</b> Iran (Islamic Republic of)               | <input type="checkbox"/> <b>MZ</b> Mozambique                               | <input type="checkbox"/> <b>TM</b> Turkmenistan             |
| <input type="checkbox"/> <b>CN</b> China                  | <input type="checkbox"/> <b>IS</b> Iceland                                  | <input type="checkbox"/> <b>NA</b> Namibia                                  | <input type="checkbox"/> <b>TR</b> Turkey                   |
| <input type="checkbox"/> <b>CU</b> Cuba                   | <input type="checkbox"/> <b>IT</b> Italy                                    | <input type="checkbox"/> <b>NO</b> Norway                                   | <input type="checkbox"/> <b>UA</b> Ukraine                  |
| <input type="checkbox"/> <b>CY</b> Cyprus                 | <input type="checkbox"/> <b>JP</b> Japan                                    | <input type="checkbox"/> <b>OM</b> Oman                                     | <input type="checkbox"/> <b>US</b> United States of America |
| <input type="checkbox"/> <b>CZ</b> Czech Republic         | <input type="checkbox"/> <b>KE</b> Kenya                                    | <input type="checkbox"/> <b>PL</b> Poland                                   | <input type="checkbox"/> <b>UZ</b> Uzbekistan               |
| <input type="checkbox"/> <b>DE</b> Germany                | <input type="checkbox"/> <b>KG</b> Kyrgyzstan                               | <input type="checkbox"/> <b>PT</b> Portugal                                 | <input type="checkbox"/> <b>VN</b> Viet Nam                 |
| <input type="checkbox"/> <b>DK</b> Denmark                | <input type="checkbox"/> <b>KP</b> Democratic People's<br>Republic of Korea |   | <input type="checkbox"/> <b>ZM</b> Zambia                   |

Others:

.....

**4**

**SUMMARY STATEMENT OF THE MAIN FACTS CONCERNING THE RESTRICTION**

(only a brief summary of the main facts concerning the restriction is to be given, and no supporting documentation should be attached to the present form. The following example may be used to draft the summary: “the holder’s right of disposal of the above-mentioned international registration(s) has been restricted in the Contracting Party(ies) indicated in heading 3, following the execution of a ....., dated ....., in favour of .....”)

.....  
.....  
.....  
.....  
.....  
.....

**5**

**SIGNATURE BY THE HOLDER OR HIS REPRESENTATIVE (where applicable)**

Holder

(as recorded in the International Register)

Representative of the holder

(as recorded in the International Register)

Name: .....

Name: .....

Signature: .....

Signature: .....

**6**

**OFFICE PRESENTING THE REQUEST (where applicable)**

Name of the Office

.....

Signature and/or stamp of the Office

.....