

DM/5 (E)



REQUEST FOR THE RECORDING OF A RENUNCIATION

IMPORTANT

1. You can request the recording of a renunciation of **multiple** international registrations of the **same holder**, if the designated Contracting Parties in respect of which the international registration is renounced are the same for each of the international registrations concerned.
2. The request must relate to **all designs** covered by the international registration(s). If the request relates to only some of the designs, use **form DM/3** (limitation).
3. You must complete this form electronically; WIPO cannot accept handwritten forms.
4. All fields are **mandatory** unless indicated otherwise.
5. Please avoid printing and scanning the form. Upload the completed and signed form directly to WIPO through **Contact Hague**.
6. For more information on the request for the recording of a renunciation, refer to the **Hague Guide for Users**.

DM/5 (E)



REQUEST FOR THE RECORDING OF A RENUNCIATION

For use by the holder

Reference (*optional*):

Number of continuation sheets (*if any*):

For use by WIPO

1. International Registration Number(s)

You can request the recording of a renunciation of multiple international registrations of the same holder, if the designated Contracting Parties in respect of which the international registration is renounced are the same for each of the international registrations concerned. Provide the international registration number **for each international registration** concerned (e.g. DM/123456). Separate multiple registration numbers with a semicolon.

If the space provided is not sufficient, check this box and use a [continuation sheet](#).

2. Name of the Holder

As recorded in the International Register

3. Contracting Parties

Select the scope from one of the following two options:

- The renunciation concerns all designated Contracting Parties.
- The renunciation concerns the following designated Contracting Parties:

- | | | |
|---|--|--|
| <input type="checkbox"/> AL Albania | <input type="checkbox"/> GB United Kingdom | <input type="checkbox"/> NA Namibia |
| <input type="checkbox"/> AM Armenia | <input type="checkbox"/> GE Georgia | <input type="checkbox"/> NE Niger |
| <input type="checkbox"/> AZ Azerbaijan | <input type="checkbox"/> GH Ghana | <input type="checkbox"/> NO Norway |
| <input type="checkbox"/> BA Bosnia and Herzegovina | <input type="checkbox"/> GR Greece | <input type="checkbox"/> OA African Intellectual Property Organization (OAPI) |
| <input type="checkbox"/> BG Bulgaria | <input type="checkbox"/> HR Croatia | <input type="checkbox"/> OM Oman |
| <input type="checkbox"/> BJ Benin | <input type="checkbox"/> HU Hungary | <input type="checkbox"/> PL Poland |
| <input type="checkbox"/> BN Brunei Darussalam | <input type="checkbox"/> IL Israel | <input type="checkbox"/> RO Romania |
| <input type="checkbox"/> BQ Bonaire, Sint Eustatius and Saba | <input type="checkbox"/> IS Iceland | <input type="checkbox"/> RS Serbia |
| <input type="checkbox"/> BW Botswana | <input type="checkbox"/> IT Italy | <input type="checkbox"/> RU Russian Federation |
| <input type="checkbox"/> BX Benelux | <input type="checkbox"/> JM Jamaica | <input type="checkbox"/> RW Rwanda |
| <input type="checkbox"/> BY Belarus | <input type="checkbox"/> JP Japan | <input type="checkbox"/> SG Singapore |
| <input type="checkbox"/> BZ Belize | <input type="checkbox"/> KG Kyrgyzstan | <input type="checkbox"/> SI Slovenia |
| <input type="checkbox"/> CA Canada | <input type="checkbox"/> KH Cambodia | <input type="checkbox"/> SM San Marino |
| <input type="checkbox"/> CH Switzerland | <input type="checkbox"/> KP Democratic People's Republic of Korea | <input type="checkbox"/> SN Senegal |
| <input type="checkbox"/> CI Côte d'Ivoire | <input type="checkbox"/> KR Republic of Korea | <input type="checkbox"/> SR Suriname |
| <input type="checkbox"/> CN China | <input type="checkbox"/> LI Liechtenstein | <input type="checkbox"/> ST Sao Tome and Principe |
| <input type="checkbox"/> CW Curaçao | <input type="checkbox"/> LT Lithuania | <input type="checkbox"/> SX Sint Maarten |
| <input type="checkbox"/> DE Germany | <input type="checkbox"/> LV Latvia | <input type="checkbox"/> SY Syrian Arab Republic |
| <input type="checkbox"/> DK Denmark | <input type="checkbox"/> MA Morocco | <input type="checkbox"/> TJ Tajikistan |
| <input type="checkbox"/> EE Estonia | <input type="checkbox"/> MC Monaco | <input type="checkbox"/> TM Turkmenistan |
| <input type="checkbox"/> EG Egypt | <input type="checkbox"/> MD Republic of Moldova | <input type="checkbox"/> TN Tunisia |
| <input type="checkbox"/> EM European Union | <input type="checkbox"/> ME Montenegro | <input type="checkbox"/> TR Türkiye |
| <input type="checkbox"/> ES Spain | <input type="checkbox"/> MK North Macedonia | <input type="checkbox"/> UA Ukraine |
| <input type="checkbox"/> FI Finland | <input type="checkbox"/> ML Mali | <input type="checkbox"/> US United States of America |
| <input type="checkbox"/> FR France | <input type="checkbox"/> MN Mongolia | <input type="checkbox"/> VN Viet Nam |
| <input type="checkbox"/> GA Gabon | <input type="checkbox"/> MX Mexico | <input type="checkbox"/> WS Samoa |

4. Signature

The signatory is the:

Holder

Representative of the holder

Full Name:

As recorded in the International Register

Date:

Day/month/year

Signature:

Text string signatures (e.g. /John Doe/) are recommended. Signatures may be handwritten, printed, stamped, typed or in another electronic form (image, digital or computer generated).

PAYMENT OF FEES

1. Amount of fees (in Swiss francs)

144	x		per international registration mentioned in item 1	TOTAL	=	
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2. Instruction to debit from a Current Account at WIPO

WIPO is hereby instructed to debit the required amount of fees from the following Current Account at WIPO (if this item is completed, it is not necessary to complete items 3 or 4 below):

Holder of the account:

Account number:

Identity of the party giving the instruction:

Full name or authorized user name

3. Payment already acknowledged

This must refer to a payment that you have previously sent to WIPO and wish to use for this request.

Identity of the party which made the payment:

Full name of the bank account holder

WIPO receipt number:

Receipt number of your previous payment(s)

4. Bank transfer

Identity of the party making the payment:

Full name of the bank account holder

Payment made to WIPO bank account
WIPO, Credit Suisse, CH-1211 Geneva 70
IBAN No. CH51 0483 5048 7080 8100 0
Swift/BIC: CRESCHZZ80A

Payment identification:	
	As indicated in the payment, e.g. Hague, DM/123456.
day/month/year:	

Payment made to WIPO postal account
(within Europe only) WIPO, SWISS
POST/Postfinance, Engelhaldenstrasse 37,
CH-3030 Bern
IBAN No. CH03 0900 0000 1200 5000 8
Swift/BIC: POFICHBE

Payment identification:	
	As indicated in the payment, e.g. Hague, DM/123456.
day/month/year:	