

REQUEST FOR THE RECORDING OF A CHANGE IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE

IMPORTANT

1. You may use this form to request the recording of a change in the name and/or postal address of the recorded representative (use [form DM/7](#) to appoint a new representative). The use of this form is not compulsory. If you would like to record a new or updated **email address only**, use [Contact Hague](#).
2. There is **no fee** for the recording of a change in the name and/or address of the recorded representative.
3. Complete this form electronically; WIPO does not accept handwritten forms.
4. All fields are **mandatory** unless indicated otherwise.
5. Avoid printing and scanning this form. Upload the completed and signed form directly to WIPO through [Contact Hague](#).

DM/8 (E)



REQUEST FOR THE RECORDING OF A CHANGE IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE

For use by the applicant/holder

Reference (*optional*):

Number of continuation sheets (*if any*):

For use by WIPO

1. International Application(s)/International Registration(s)

Provide the application reference number **for each international application concerned** (ex. 123456789, WIPO12345) and/or the international registration number **for each international registration concerned** (ex. DM/123456). Separate multiple reference numbers with a semicolon.

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

2. Name of the Representative

As recorded in the International Register

3. Change in Name and/or Address of the Representative

Only complete the fields for which information has changed.

The representative is a:

Natural person:

Legal entity:

Family (last) name

Given (first) name

New official designation (legal nature)

Address:

E.g. street, house number *(if any)*

Postal code:

City:

Region/state *(optional)*:

Country:

Email address:

WIPO will send all communications to this email address. The email address must be accurate and kept up to date.

Telephone *(optional)*:

Include country and area code, e.g., +41 22 338 7575

4. Signature of the Representative

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).