

HAGUE AGREEMENT
CONCERNING THE INTERNATIONAL REGISTRATION OF INDUSTRIAL DESIGNS

REQUEST FOR THE RECORDING OF A LIMITATION

IMPORTANT

1. Please submit the present form directly to the International Bureau via [Contact Hague](#).
2. This form may only be used to request the recording of a limitation for a **single** international registration.
3. The request must necessarily relate to some only of the industrial designs covered by the international registration (in respect of some or all designated Contracting Parties). If the request relates to all industrial designs covered by the international registration, form DM/5 (renunciation) must be used instead.
4. The limitation to the industrial designs indicated in item 4 must be the same for all Contracting Parties indicated in item 5.

This cover page must not be sent to the International Bureau.

World Intellectual Property Organization
34, chemin des Colombettes, P.O. Box 18,
1211 Geneva 20, Switzerland
Tel.: +41 (0)22 338 7575
Internet: www.wipo.int
For further information, please [Contact Hague](#)

REQUEST FOR THE RECORDING OF A LIMITATION

For use by the holder

This request contains the following number of continuation sheets:

Reference:

For use by the International Bureau

1 INTERNATIONAL REGISTRATION NUMBER

.....

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

.....

3 APPOINTMENT OF A REPRESENTATIVE (optional) (all fields are mandatory except where indicated otherwise) **(do not complete this item** if there is no change in the representative already recorded in the International Register)

(a) Representative is a (check the appropriate box)¹:

Natural person – Family name: Given name:

Legal entity – Official designation:

(b) Address:

Postal code: City: Country:

(c) Email²:

(d) Telephone³:

(e) To appoint a representative, the present request must be signed by the holder, or be accompanied by a power of attorney or form DM7 (check the appropriate box):

item 6 of the request is signed by the holder; or

a power of attorney or form DM7 is attached to the present form

1 Only one box should be checked. If both boxes are checked, the name of the representative will be recorded with the name of the natural person preceding the name of the legal entity.

2 When a representative is appointed, all communications concerning the international registration in item 1 will be sent only to the email address of the representative. The holder and the representative must ensure that the email address indicated above is accurate and kept up to date.

3 Indicating a phone number is not required, but it will allow the International Bureau to reach your representative if needed.

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INDUSTRIAL DESIGNS

Specify the number of each industrial design affected by the limitation (for which protection is no longer sought):

Number of each industrial design

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

If the space provided is not sufficient, check this box and use a continuation sheet.

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CONTRACTING PARTIES (check either (a) or (b))

- (a) The limitation of the industrial designs indicated in item 4 is to be recorded for **all** the designated Contracting Parties;
- (b) The limitation of the industrial designs indicated in item 4 is to be recorded for the following designated Contracting Parties:

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

Others:

.....

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SIGNATURE AND/OR SEAL (mandatory)⁴

(a) Identify the signatory by checking the appropriate box:

(i) Holder

(ii) Representative of the holder

(b) Name:

(c) Signature and/or seal:

(d) Date of signature (day/month/year):

Name of the person to contact, if necessary:

Email: Telephone:

⁴ The signature may be hand written, printed, stamped or in electronic form. Accepted forms of electronic signature are text-string, image, digital or computer generated signatures.

PAYMENT OF FEES

1. INSTRUCTION TO DEBIT FROM A WIPO CURRENT ACCOUNT
(if this box is completed, it is not necessary to complete item 2)

The International Bureau is hereby instructed to debit the required amount of fees from the following WIPO current account:

Holder of the account: Account number:

Identity of the party giving the instruction:

2. AMOUNT OF FEES; METHOD OF PAYMENT

Amount of fees request (Swiss francs) **144.--**

Identity of the party effecting the payment:

Payment made to WIPO bank account IBAN No. CH51 0483 5048 7080 8100 0 Credit Suisse, CH-1211 Geneva 70 Swift/BIC: CRESCHZZ80A	<input type="checkbox"/>	Payment identification	day/month/year
Payment made to WIPO postal account IBAN No. CH03 0900 0000 1200 5000 8 Swift/BIC: POFICHBE	<input type="checkbox"/>	Payment identification	day/month/year