HAGUE AGREEMENT
CONCERNING THE INTERNATIONAL REGISTRATION OF INDUSTRIAL DESIGNS

REQUEST FOR THE RECORDING OF A RENUNCIATION

IMPORTANT
1. One single form may be used to request the recording of a renunciation in respect of several international registrations of the same holder, provided that 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 necessarily relate to all the industrial designs covered by the international registration(s) (in respect of some or all designated Contracting Parties). If the request relates to some only of the industrial designs, form DM/3 (limitation) must be used instead.

This cover page must not be sent to the International Bureau.
REQUEST FOR THE RECORDING OF A RENUNCIATION

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(S)


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


3 APPOINTMENT OF A REPRESENTATIVE (optional)
(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: ........................................
   - Telephone: ........................................ E-mail address: ........................................
(c) To appoint a representative, the present request must be signed by the holder, or be accompanied by a power of attorney or form DM/7 (check the appropriate box):
   - item 5 of the request is signed by the holder; or
   - a power of attorney or form DM/7 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.

4 CONTRACTING PARTIES (check either (a) or (b))
(a) The renunciation concerns all designated Contracting Parties;
(b) The renunciation concerns the following designated Contracting Parties:

- AL Albania
- AM Armenia
- AZ Azerbaijan
- BA Bosnia and Herzegovina
- BG Bulgaria
- BJ Benin
- BN Brunei Darussalam
- BQ Bonaire, Sint Eustatius and Saba\(^2\)
- BW Botswana
- BX Benelux
- BZ Belize
- CA Canada
- CH Switzerland
- CI Côte d’Ivoire
- CW Curaçao\(^2\)
- DE Germany
- DK Denmark
- EE Estonia
- EG Egypt
- EM European Union
- ES Spain
- FI Finland
- GA Gabon
- GB United Kingdom
- GE Georgia
- GH Ghana
- GR Greece
- HR Croatia
- HU Hungary
- IL Israel
- IS Iceland
- IT Italy
- JP Japan
- KG Kyrgyzstan
- KH Cambodia
- KP Democratic People’s Republic of Korea
- KR Republic of Korea
- LI Liechtenstein
- LT Lithuania
- LV Latvia
- MA Morocco
- MC Monaco
- MD Republic of Moldova
- ME Montenegro
- MK North Macedonia
- ML Mali
- MN Mongolia
- MX Mexico
- NA Nambia
- NE Niger
- NO Norway
- OA African Intellectual Property Office
- OM Oman
- PL Poland
- RO Romania
- RS Serbia
- RU Russian Federation
- RW Rwanda
- SG Singapore
- SI Slovenia
- SM San Marino
- SN Senegal
- SR Suriname
- ST Sao Tome and Principe
- SX Sint Maarten\(^2\)
- SY Syrian Arab Republic
- TJ Tajikistan
- TM Turkmenistan
- TN Tunisia
- TR Turkey
- UA Ukraine
- US United States of America
- VN Viet Nam
- WS Samoa

Others:

\(^2\) Territorial entity previously part of the Netherlands Antilles.
SIGNATURE AND/or SEAL

(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 (dd/mm/yyyy): ........................................................................................................

Name of the person to contact, if necessary: ................................................................................................

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 below)

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 (144 Swiss francs) × ........ (per international registration mentioned in item 1) Grand total (Swiss francs) ..........................................................

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
Payment identification ........................................... dd/mm/yyyy

Payment made to WIPO postal account
IBAN No. CH03 0900 0000 1200 5000 8
Swift/BIC: POFICHBE
Payment identification ........................................... dd/mm/yyyy

DM/5 (E) – June 2020