HAGUE AGREEMENT
CONCERNING THE INTERNATIONAL REGISTRATION OF INDUSTRIAL DESIGNS

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

IMPORTANT

1. The use of this form is not compulsory. It is made available for the convenience of representatives of holders of international registrations.

2. This form is to request only the recording of a change in the name and/or address of the recorded representative and not to appoint a new representative, in which case use form DM7.

3. The recording of a change in the name and/or address of the recorded representative is exempt from the payment of a fee.

This cover page must not be sent to the International Bureau.
**REQUEST FOR THE RECORDING OF A CHANGE IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE**

For use by the holder

This request contains the following number of continuation sheets: ............................................

Reference: ............................................

For use by the International Bureau

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**1 INTERNATIONAL REGISTRATION NUMBER(S)**

(this form may be used for several international registrations)

- ............................................ ............................................ ............................................
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**2 NAME OF THE REPRESENTATIVE**

(as recorded in the International Register)

- ............................................ ............................................ ............................................

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**3 CHANGE IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE**

(indicate the change(s) by checking the appropriate box(es))

(a) Name: representative is a (check the appropriate box)*:

- Natural person – Family name: ............................................ Given name: ............................................
- Legal entity – New official designation: ............................................ ............................................

(b) Address: ............................................ ............................................ ............................................

(c) Telephone: ............................................ E-mail address: ............................................

* 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.

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**4 SIGNATURE AND/OR SEAL OF THE REPRESENTATIVE**

(a) Name: ............................................ ............................................ ............................................

(b) Signature and/or seal: ............................................ ............................................ ............................................

(c) Date of signature (dd/mm/yyyy): ............................................ ............................................ ............................................

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