REQUEST FOR AMENDMENT OF THE RECORDING OF A LICENSE

(Rule 20bis of the Regulations under the Protocol)

IMPORTANT

1. This form is to be used only to request the amendment of the recording of a license. Where it is intended to request the cancellation of a license, form MM15 must be submitted.

2. This request may be presented to the International Bureau directly by the holder or by the Office of the Contracting Party of the holder or by the Office of a Contracting Party with respect to which the license is granted.

3. One single form may be used to request the amendment of the recording of a license in respect of several international registrations of the same holder, provided that:
   – the amendment applies to all, or to the same, designated Contracting Parties, for each of the international registrations concerned; and
   – the amendment concerns all, or the same, goods and services, for each of the international registrations concerned.

4. Where the request relates to several international registrations, a fee must be paid in respect of each international registration.

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

Madrid System – Contacts

Madrid Customer Service opening hours:
Monday – Friday, 9:00 a.m. to 6:00 p.m. (Geneva time)
Telephone: + 41 22 338 86 86

Inquiries / submitting forms:
http://www.wipo.int/madrid/en/contact/

Mailing address

Madrid Operations Division
Madrid Registry
Brands and Designs Sector
World Intellectual Property Organization (WIPO)
34, Chemin des Colombettes
1211 Geneva 20
Switzerland
REQUEST FOR AMENDMENT OF THE RECORDING OF A LICENSE

For use by the holder

This request contains the following number of continuation sheets:


Holder's reference: .........................................................

For use by the Office

Office's reference: .............................................................

INTERNATIONAL REGISTRATION NUMBER(S)

(this form may be used for several international registrations of the same holder, provided that the amendment applies to all, or to the same, designated Contracting Parties and concerns all, or the same, goods and services for each of the international registrations concerned)


NAME OF THE HOLDER

(as recorded in the International Register)


LICENSEE

(as recorded in the International Register)

Name: ...........................................................................................

Address: ...........................................................................................


E-mail address: ............................................................................................

By providing an e-mail address, any further correspondence from the International Bureau related to this/these international registration(s) will be sent only electronically and, therefore, you will no longer receive any paper correspondence. Likewise, any further correspondence from the International Bureau related to other international applications or international registrations for which the same e-mail address has been, or will be, provided will also be sent only electronically. Please note that, for the purpose of electronic communication, there can be only one e-mail address recorded per each international registration.
4 CHANGE(S)
(where there are several licenses recorded in respect of the international registrations(s), it should be clearly indicated which license(s) the amendment concerns)

Tick the appropriate box(es):
(a) ☐ New name of the licensee: ____________________________________________________________
(b) ☐ New address of the licensee: _________________________________________________________

☐ Details of other change(s): ____________________________________________________________

SIGNATURE BY THE HOLDER AND/OR HIS REPRESENTATIVE

Holder (as recorded in the International Register)  Representative of the holder (as recorded in the International Register)

By signing this form, I declare that I am entitled to sign it under the applicable law:
Name: ____________________________________________  Name: ____________________________________________
Signature: ________________________________________  Signature: ________________________________________

OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE REQUEST
(where this request is presented through an Office)

Name of the Office: __________________________________________________________

Name and signature of the official signing on behalf of the Office:
By signing this form, I declare that I am entitled to sign it under the applicable law:

Name and e-mail address of the contact person in the Office: ____________________________________________
## FEE CALCULATION SHEET

### (a) INSTRUCTIONS TO DEBIT FROM A CURRENT ACCOUNT

- [ ] The International Bureau is hereby instructed to debit the required amount of fees from a current account opened with the International Bureau (if this box is checked, it is not necessary to complete (b)).

  Holder of the account: ................................................................. Account number: .................................................................

  Identity of the party giving the instructions: .................................................................

### (b) AMOUNT OF FEES

Amount (177 Swiss francs) × ....... (per international registration mentioned in item 1)  

<table>
<thead>
<tr>
<th>Amount (Swiss francs)</th>
<th>Grand total (Swiss francs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>177</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### (c) METHOD OF PAYMENT

<table>
<thead>
<tr>
<th>Payment received and acknowledged by WIPO</th>
<th>WIPO receipt number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payment made to WIPO bank account</td>
<td>Payment identification</td>
</tr>
<tr>
<td>IBAN No. CH51 0483 5048 7080 8100 0</td>
<td>dd/mm/yyyy</td>
</tr>
<tr>
<td>Crédit Suisse, CH-1211 Geneva 70</td>
<td></td>
</tr>
<tr>
<td>Swift/BIC: CRESCHZZ80A</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Payment made to WIPO postal account (within Europe only)</th>
<th>Payment identification</th>
<th>Payment identification</th>
</tr>
</thead>
<tbody>
<tr>
<td>IBAN No. CH03 0900 0000 1200 5000 8</td>
<td>dd/mm/yyyy</td>
<td>dd/mm/yyyy</td>
</tr>
<tr>
<td>Swift/BIC: POFICHE</td>
<td></td>
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</tr>
</tbody>
</table>