

**MM15 (E) – REQUEST FOR CANCELLATION OF THE RECORDING OF A LICENSE**

**For use by the holder:**

Number of continuation sheets for several licensees:

Number of continuation sheets:

Holder’s reference:

**For use by the Office:**

Office’s reference:

**1. INTERNATIONAL REGISTRATION NUMBER(S)**

This form may be used for **several** international registrations of the **same** holder in respect of which the **same** license is recorded.

**2. NAME OF THE HOLDER<sup>1</sup>**

As **recorded** in the International Register.

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<sup>1</sup> Where the international registration is **jointly owned** indicate the names of each joint holder as recorded in the international registration here.

**3. LICENSEE<sup>2</sup>**

**As recorded** in the International Register.

If there is **more than one licensee**, indicate the number of new licensees and complete the “Continuation Sheet for Several Licensees”.

**Number of licensees:**

(a) **Name:**

(b) **Address:**

**4. LICENSE(S) TO BE CANCELLED**

Where there are **several** licenses recorded in respect of the international registrations(s), you must clearly indicate **which** license(s) the cancellation concerns.

**5. SIGNATURE OF THE HOLDER AND/OR THEIR REPRESENTATIVE**

**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:

Signature:

**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:

Signature:

<sup>2</sup> If there is more than one licensee, indicate the details for the first licensee **only** and provide the name(s) and address(es) of the additional licensee(s) in the “Continuation Sheet for Several Licensees” attached to this form.

**6. OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE REQUEST**

Where the request is presented through an Office.

**(a) Name of the Office:**

**(b) 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.*

**(c) Name and e-mail address of the contact person in the Office:**

**CONTINUATION SHEET FOR SEVERAL LICENSEES**

No.  of

Please, complete a separate continuation sheet for **each licensee**.

**LICENSEE**      **No.**  **of**

(a) **Name:**

(b) **Address:**

**CONTINUATION SHEET**

No.  of

A large, empty rectangular box with a thin black border, occupying most of the page. It is intended for a drawing or other content related to the continuation sheet.