

MADRID AGREEMENT AND PROTOCOL CONCERNING THE
INTERNATIONAL REGISTRATION OF MARKS

**REQUEST FOR THE MERGER OF INTERNATIONAL REGISTRATIONS
RESULTING FROM THE RECORDING OF A PARTIAL CHANGE IN OWNERSHIP**

(Rule 27*ter*(1) of the Common Regulations)

IMPORTANT

This form must be used to request the merger of international registrations resulting from the recording of a partial change in ownership.

This request may be presented directly to the International Bureau by the holder or through the Office of the Contracting Party of the holder.

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 THE MERGER OF INTERNATIONAL REGISTRATIONS
RESULTING FROM THE RECORDING OF A PARTIAL CHANGE IN OWNERSHIP**

<p style="text-align: center;"><u>For the holder</u></p> <p>This request contains the following number of continuation sheets: Holder's reference:</p>	<p style="text-align: center;"><u>For the Office</u></p> <p>Office's reference:</p>
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1 NAME OF THE HOLDER
(as recorded in the International Register; **all** international registrations to be merged must be in the name of the same person)
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2 INTERNATIONAL REGISTRATION NUMBERS
(please indicate below the number of **all** the international registrations to be merged)

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3 SIGNATURE BY THE HOLDER OR THE RECORDED REPRESENTATIVE

<p><u>Holder</u> (as recorded in the International Register)</p> <p><i>By signing this form, I declare that I am entitled to sign it under the applicable law:</i></p> <p>Name:</p> <p>Signature:</p>	<p><u>Representative of the holder</u> (as recorded in the International Register)</p> <p><i>By signing this form, I declare that I am entitled to sign it under the applicable law:</i></p> <p>Name:</p> <p>Signature:</p>
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4 OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE REQUEST
(where this request is presented through that 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:

.....