


**SINGAPORE TRADE MARKS ACT (CHAPTER 332)
TRADE MARKS RULES**

<p>FORM TM19</p>  <p>*3004*</p>	<p>Application for Renewal/Restoration of Registration</p>								
<p><u>Pre-requisites:</u> You will need the following to complete the form:</p> <ol style="list-style-type: none"> a. Trade Mark No. b. Due date (i.e. expiry date) of the trade mark. <p><u>Estimated Time:</u> This form may take approximately 2 - 7 minutes to complete.</p> <p><u>General:</u></p> <ol style="list-style-type: none"> a. * denotes mandatory field. b. You must send a separate form for each trade mark number. c. The fee for this form is payable on a per class basis. 									
PART 1 Reference									
<p>Applicant/ Agent Reference</p>	<input style="width:100%; height: 25px;" type="text"/>								
<p>IPOS Reference <i>(if applicable)</i></p>	<input style="width:100%; height: 25px;" type="text"/>								
PART 2 Application No.*									
<p>Trade Mark No.</p>	<input style="width:100%; height: 25px;" type="text"/>								
<p>Class No.this Renewal relates to</p>	<table style="width:100%; border: none;"> <tr> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> <td><input style="width: 30px; height: 25px;" type="text"/></td> </tr> </table> <p><i>(Note: Class(es) must be registered in order to be renewable.)</i></p>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>
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<p>Total No. of Classes this Renewal relates to</p>	<input style="width:100%; height: 25px;" type="text"/>								
PART 3 Name of Registered Proprietor*									
<p><i>Note: If there is insufficient space, please use the continuation sheet CS 4.</i></p>									
<p>UEN/ Company Code <i>(if applicable)</i></p>	<input style="width:100%; height: 25px;" type="text"/>								
<p>Name</p>	<input style="width:100%; height: 50px;" type="text"/>								
<p>Sole Proprietor or Partners' Name <i>(if sole proprietorship or partnership)</i></p>	<input style="width:100%; height: 50px;" type="text"/>								

PART 4 Due Date of Renewal*

State the Due Date of
Renewal
(DD/MM/YYYY)

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(Please cross one of the
following)

Application for renewal
(Before the due date of renewal)

Application for late renewal
(Within 6 months after the due date of renewal)

Application for restoration and renewal
(6-12 months after the due date of renewal)

PART 5 Contact Details*Note:

- a. Where an agent with UEN is appointed, the fields for "Agent UEN/ Company Code", "Agent Name" and "Address for Service in Singapore" should be completed. Where an individual or an agent without UEN is appointed, the sub-field "Representative or C/O Name" and "Address for Service in Singapore" should be completed instead.
- b. For the purpose of renewal and/or restoration, the official correspondence will be sent to the address for service in Singapore as indicated below

Agent UEN/ Company
Code

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Agent Name

Representative or C/O
Name

Address for Service in Singapore

Block/ House
No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Street Name

Level - Unit

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Building
Name

Postal Code

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Contact Person
(if applicable)

Direct Telephone No.
(if applicable)

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Email Address
(if applicable)

PART 6 Declaration*													
Declaration	<p><u>By Person Filing the Form</u></p> <p>I, the undersigned, do hereby declare that the information furnished above is true to the best of my knowledge.</p> <p><u>By Agent</u></p> <p>I, the undersigned, do hereby declare that :</p> <p>i. I have been duly authorised to act as an agent on behalf of the person(s) filing this form.</p> <p>ii. The information furnished above on behalf of the person(s) filing this form is true to the best of the person(s)' knowledge.</p>												
Name	<input type="text"/>												
Signature	<input type="text"/>												
Date (DD/MM/YYYY)	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>												
No. of Extra Sheets Attached to this Form	<input type="text"/> sheet(s)												