

Application by Registered Proprietor of Design to Cancel Registration

Save time and postage - submit your completed form through our online correspondence service
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Design Number(s)	Current Owner

Name of Registered Proprietor: _____

Address: _____

I (or We), the undersigned _____

of _____

apply that the registration of the design No. _____ may be cancelled.

Presenter Details: *(if different from above)*

Name _____

Organisation _____

Address _____

Email _____

Telephone Number _____

Your reference _____

Signed by:

Name of owner/authorised person

Signature of owner/authorised person

Dated this _____ of _____
(day) (month) (year)

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By post to PO Box 9241
Marion Square
Wellington 6141
New Zealand

By courier to 205 Victoria Street
Wellington
New Zealand

