

# REQUEST FOR A CERTIFIED COPY OF ENTRY IN THE REGISTER

SAVE TIME AND POSTAGE – submit your completed form through our online correspondence service [www.iponz.govt.nz/online-services](http://www.iponz.govt.nz/online-services)

**1. Trade mark(s) details:** *(Please state the trade mark(s) to which the assignment or transmission relates).*

Trade Mark Number	Description or Representation of the Trade Mark

**2. Details of request:**

(please set out the particulars of the Register that you would like the Commissioner to certify).

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**3. Contact Details:**

Full name \_\_\_\_\_

Address for communication in New Zealand \_\_\_\_\_

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Assignee's agent *(if any)* \_\_\_\_\_

**Presenter Details:** *(if different from the applicant information)*

Name \_\_\_\_\_

Organisation \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Signed by:**

\_\_\_\_\_  
Name of owner/authorised person

\_\_\_\_\_  
Signature of owner/authorised person

Dated this \_\_\_\_\_ of \_\_\_\_\_  
(day) (month) (year)

**Payment:**

The fee for filing this application is:

Fee	+ G.S.T ( <i>where applicable</i> )	= Total Fee <b>\$NZD</b>
\$30.00	\$4.50	

Submit your complete form as a file online and pay by MED account or credit card. See our [website](#) for other payment methods.

Return your completed form through our online correspondence service  
[www.iponz.govt.nz/online-services](http://www.iponz.govt.nz/online-services).

[WWW.IPONZ.GOV.T.NZ](http://WWW.IPONZ.GOV.T.NZ)

See our [website](#) for other options.

**FOR ASSISTANCE COMPLETING THIS FORM PLEASE CALL 0508 4 IPONZ (0508 447 669)**