

# APPLICATION FOR A MERGER OF A TRADE MARK

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 of all applications or registrations to be merged:

Trade Mark Numbers	Trade Mark Numbers

## 2. Owner/Applicant details:

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

Address for service in New Zealand \_\_\_\_\_

\_\_\_\_\_

Applicant's agent (if any) \_\_\_\_\_

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

Name \_\_\_\_\_

Organisation \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

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

Your reference \_\_\_\_\_

### Signed by:

\_\_\_\_\_  
Name of applicant/authorised person

\_\_\_\_\_  
Signature of applicant/authorised person

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

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)**