

ALTERATION OF A NAME AND/OR ADDRESS

Details of the trade mark(s)

1. Trade mark number(s) to which the alteration relates.	
2. Trade mark(s) <i>If necessary attach separate sheets of paper. Please number each one and indicate in this section how many extra sheets you have used.</i>	

Nature of the alteration

3. Indicate the nature of the amendment by ticking the appropriate box(es).	
<input type="checkbox"/> Name <input type="checkbox"/> Address	
4. Indicate the party details you wish to alter by ticking one of the following boxes.	
<input type="checkbox"/> Owner <input type="checkbox"/> Licensee	
5. The name of the owner/licensee's agent (if any).	

Current details for party to be altered

6. Name.	
7. Address.	

New details for party to be altered

8. Name <i>Please provide evidence of change eg. Companies Office Certificate.</i>	
9. Address.	

Signature of owner/licensee or authorised agent: _____

Date: _____

Please return form by mail to:

The Commissioner of Trade Marks
Intellectual Property Office New Zealand
PO Box 9241
Marion Square, Wellington
New Zealand

Contact Telephone No:

Contact Email Address: