**THE INTELLECTUAL PROPERTY LAW N0 31/2009 of 26/10/2009**

**APPLICATION FOR TRADEMARK (S) OPPOSITION ( Art 146)**

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| --- | --- | --- | --- | --- |
| **To:**  **The Office of the Registrar General**  **Rwanda Development Board (RDB)**  **Remera, Nyarutarama Road, PO BOX 3269 Kigali, Rwanda** | | | | |
| 1.Application for the amendments of: Choose an item. | | | | |
| **2.Registration (filing ) Number:** Click or tap here to enter text. | | | | |
| **3.Particulars** | | | | |
| **Opposition** | **Opponent details** | **Company Name** | Click or tap here to enter text. | |
|  | **Address** | Click or tap here to enter text. | |
| **Tel :** | Click or tap here to enter text. | |
|  | **Defender**  **Details** | **Company Name** | Click or tap here to enter text. | |
| **Address** | Click or tap here to enter text. | |
| **Tel:** | Click or tap here to enter text. | |
| **Publication date of the mark** | Click or tap to enter a date. | |
| **4. Details of the representative of the opponent (Company, NGO, Association, Institution …etc.)** | | | | | |
| 1. Full Name | | | | Click or tap here to enter text. | |
| 1. ID/Passport Number | | | | Click or tap here to enter text. | |
| 1. Address | | | | Click or tap here to enter text. | |
| 1. Phone Number | | | | Click or tap here to enter text. | |
| 1. E-mail | | | | Click or tap here to enter text. | |
| **5. Details of the lawyer (agent /attorney) representing the Opponent** | | | | | |
| 1. Full Name | | | | Click or tap here to enter text. | |
| 1. ii) ID/Passport Number | | | | Click or tap here to enter text. | |
| 1. Address | | | | Click or tap here to enter text. | |
| 1. Phone Number | | | | Click or tap here to enter text. | |
| 1. E-mail | | | | Click or tap here to enter text. | |
| **6. Attachments** | | | | | |
| 1. Opposition statement and evidences | | | |  | |
| 1. ID/Passport of the representative | | | |  | |
| 1. Payment receipt | | | |  | |
| 1. Copy the trademark publication Journal | | | |  | |
| 1. Power of attorney, where is applicable | | | |  | |
| ***7. I hereby certify that the information given to the best of my knowledge is true, complete and all signatures in the attachments are made by the persons stated. I also understand that any false declaration may lead to prosecution***.  Date: Click or tap to enter a date. Applicant’s Signature: ………………………...................................................... | | | | | |