**GEOGRAPHICAL INDICATIONS ACT 2014**

GEOGRAPHICAL INDICATIONS RULES 2019

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| **FORM CM3** | **Application by Registrant to Cancel Registration of Geographical Indication** | | | |
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| *Pre-requisite:*  *Please prepare a statement of the ground(s) relied upon for this application for cancellation.*  *Estimated Time:*  *This form may take approximately 3 - 7 minutes to complete.*  *Notes:*   1. *\* denotes mandatory fields.* 2. *Please note that any fee paid is not refundable.* | | | | |
| **PART 1** | **Your reference** | | | |
| **Your reference**  *(if any)* |  | | | |
| **PART 2** | **Geographical Indication No.\*** | | | |
| **Geographical Indication No.** |  | | | |
| **PART 3** | **Party filing this application\*** | | | |
| *Note:*  *If there is more than one party filing this application for cancellation, please provide the particulars of the remaining parties in the continuation sheet CS1.* | | | | |
| **This application is filed by (or on behalf of)** *(Cross one box only)* | Registrant of the above geographical indication *(Please proceed to Part 4)*  Other party who is not the Registrant of the above geographical indication *(Please state the party’s details below)* | | | |
| **UEN / Company Code**  *(if available)* | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  | | | | |
| **Name** |  | | | |
| **Address**  *(Please provide either a Singapore address or an overseas address)* | Singapore address | | | |
| This Singapore address is to be used as the address for service for the purpose of this application. | | | |
| Block / House No. | | | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |
| Street Name | | |  |
| Level - Unit | | | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | - |  |  |  |  |  |  | |
| Building Name | | |  |
| Postal Code | | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | |
| Overseas address  Line 1  Line 2  Line 3 | | | |
| *(Please fill in the relevant fields under “Legal entity” or “Individual”)*  Legal entity | | | | |
| **Country/Region of incorporation\*** |  | | | |
| **State of incorporation**  *(mandatory for US corporations)* |  | | | |
| **Sole proprietor’s or partners’ name(s)**  *(if sole proprietorship or partnership)* |  | | | |
| Individual |  | | | |
| **Nationality\***  **Country/Region of residency\*** |  | | | |
| **PART 4** | **Nature of the cancellation\*** | | | |
| **The cancellation pertains to:**  *(Cross one box only)* | The entire Geographical Indication  The variant(s) constituting the Geographical Indication  Please state the variant(s) for which cancellation is sought in the space below.   |  | | --- | |  | | | | |
| **PART 5** | **Grounds for cancellation of registration\*** | | | |
| *Note:*  *The grounds for cancellation entered in Part 5 will be published in the Geographical Indications Journal.* | | | | |
| **Grounds for cancellation**  Application by Any Person Other Than the Registrant to Cancel Registration of Geographical Indication | Section 52(2)(a): The geographical indication was registered in breach of section 41.  [*Please specify the relevant sub-sections under section 41*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]  Section 52(2)(b): The registration was obtained fradulently or by misrepresentation.  Section 52(2)(c): The geographical indication has ceased to be protected in its country or territory of origin.  Section 52(2)(d): There has been a failure to maintain, in Singapore, any commercial activity or interest in relation to the geographical indication, including commercialisation, promotion or market monitoring.  Section 52(2)(e): In consequence of a lack of any activity by any interested party of goods identified by a registered geographical indication, the geographical indication has become the common. | | | |
| **Grounds for cancellation**  Application by the Registrant to Cancel Registration of Geographical Indication |  | | | |
| **PART 5A** | **Statement of grounds\*** | | | |
| *Notes:*   1. *The application for cancellation must be accompanied by a statement of the ground(s) relied upon for this application for cancellation. You may also provide additional evidence in support of your application.* 2. *If this application is not filed by the registrant, a copy of this application and the supporting documents must be served on the registrant of the geographical indication at the same time those documents are filed with the Registrar. Otherwise, the application will not be taken as filed* | | | | |
| The statement of ground(s) is attached.  A copy of this application and the supporting documents will be served on the registrant at the same time those documents are filed with the Registrar.  *[This box must be checked if this application is not made by the registrant]* | | | | |
| **PART 6** | **Contact details\*** | | | |
| *Notes:*   1. *If an agent is appointed to act on behalf of the party filing this application, please indicate the agent’s Unique Entity Number (UEN) or Company Code (assigned by IPOS), agent’s name and agent’s address for service in Singapore.* 2. *If you are the registrant, the address for service must be the same as the one in our records. If you are not the current agent on record for the registrant or the registrant has changed the address for service in Singapore, please also file Form CM1 or Form CM2 respectively when you submit this application.* 3. *Official correspondence will be sent electronically via IPOS Digital Hub.* | | | | |
| **Representation Type** | Self Representation  Agent/Representative | | | |
| **Agent UEN /**  **Company Code**  *(if available)* | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  | | | | |
| **Agent Name** |  | | | |
| **C/O Name**  *(if applicable)* |  | | | |
| **Address for Service**  **in Singapore** | Block / House No. | | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | | |
| Street Name | |  | |
| Level - Unit | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | - |  |  |  |  |  | | |
| Building Name | |  | |
| Postal Code | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | | |
| **Name of Contact Person** |  | | | |
| **Direct Telephone No. in Singapore**  *(if available)* | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  | | | | |
| **Email Address**  *(if available)* | *By providing an email address, you consent that we may contact you by email in relation to this application. You can expect to receive payment instructions via email.* | | | |
| **PART 7** | **Formal Declaration\*** | | | |
| **Declaration** |  | I declare that there is no action concerning the geographical indication in question pending in the Court. | | |
|  | **By party filing this application** | | | |
| I hereby declare that:  The information furnished above is true to the best of my knowledge. I understand that I may be liable for criminal prosecution for providing any false information in this application. | | | |
| **By Agent / Representative** | | | |
| I hereby declare that:   1. I have been duly authorised to act as an agent, for the purpose of this application, on behalf of the party filing this form. 2. The information furnished above on behalf of the party is true to the best of the party’s knowledge. I understand that I may be liable for criminal prosecution for providing any false information in this application. | | | |
| **Name of Declarant** |  | | | |
| **Signature** |  | | | |
| **Date**  *(DD/MM/YYYY)* | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  | | | | |

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| --- | --- |
| **GST** | **GST INFORMATION** |
| **Tax invoice\*** | |
| *Notes:*  *Tax invoice will be issued to the entity/individual as indicated* *in the field below. Goods and Services Tax (GST)-registered businesses may claim input tax with Inland Revenue Authority of Singapore (IRAS), subject to meeting the requirements under the GST Act.* | |
| **Name**  (Tax invoice to be issued to) | *The name of the party filing the application (as indicated in Part 3 of this form) is to be specified below.* |