GEOGRAPHICAL INDICATIONS ACT 2014 GEOGRAPHICAL INDICATIONS RULES 2019

FORM GI13	Notice of Objection / Opposition	
Pre-requisites: Please prepare a statement of the ground(s) relied upon. In addition, please also provide supporting evidence if your opposition relates to a pending geographical indication (GI).		
Estimated Time: This form may take approximately 4 - 8 minutes to complete.		
General a. * denotes mandatory fields. b. Please note that any fee paid is not refundable. c. If the declaration "A copy has been served on the other party at the same time." is not selected, the document will not be taken as filed.		
PART 1	Reference	
Your Reference (if any)		
IPOS Reference (if applicable)		
PART 2	Request Type*	
This objection / opposition relates to (Cross one box only)	an application to register a GI	
	an amendment of an application to register a GI	
	a request for qualification of rights to be entered in the Register	
	an application for cancellation of registration of a GI	
	an application for rectification of the register	
PART 3	GI No.*	
GI No.*		
Case No. (if applicable)		
This objection / opposition relates to (Cross one box only)	The entire GI	
(Cross one box only)	The following variant(s) constituting the GI	

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PART 4	Details of Objector / Opponent*
Note: If there is insufficient space	e, please use the continuation sheet CS 1.
UEN / Company Code (if available)	
Name	
Address	Singapore address
(Please provide <u>either</u> a Singapore address or an overseas address)	This Singapore address is to be used as the address for service for the purpose of this notice.
	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 to	under "Legal entity" or "Individual")
Country/Territory of Incorporation*	
State of incorporation (mandatory for US corporations)	
Sole proprietor's or partners' name(s) (if sole proprietorship or partners	hip)

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<u>Individual</u>	
Nationality*	
Country/Territory of Residency*	
,	
Email Address	
Email Address	
	Please note that if this is given, consent is deemed to have been provided for this to be used as an alternative address under Rule 11(9)(b) for correspondence.
DADT 6	
PART 5 Note:	Contact details*
a. If an agent is appointed to act Number (UEN) or Company C	on behalf of the party filing this application/request, please indicate the agent's Unique Entity ode (assigned by IPOS), agent's name and agent's address for service in Singapore.
b. If you have provided a Singap	ore address in Part 4 and checked the box in that field, you do not have to fill in this part. ding, official correspondence will be sent to the address for service in Singapore as indicated
in this part, or Part 4 if the Sin	gapore address is to be used as the address for service.
A	
Agent UEN/ Company Code	
(if available)	
Agent Name	
Danuarantatina an	
Representative or C/O Name	
(if applicable)	
Address for Service in	Block/ House
Singapore	No.
	Street Name
	Level - Unit
	Building Name
	Postal Code
Contact Person	
Direct Tolonhana Na	
Direct Telephone No. in Singapore	
(if available)	
Email Address	
	By providing an email address, you consent that we may contact you by email in relation to this document. You can expect to receive payment instructions via email.

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PART 6 Attachments

For notice of opposition / objection made in relation to an application for cancellation / rectification / amendment of a GI / request for qualification of rights, please attach a Statement of Grounds.

For notice of opposition made in relation to an application to register a GI, please attach:

- (i) Statement of Grounds; and
- (ii) Supporting Evidence (by way of a statutory declaration)

PART 7	Declaration*
Declaration	By Person Filing the Form
	I, the undersigned, do 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
	I, the undersigned, do hereby declare that
	 I have been duly authorised to act as an agent on behalf of the person(s) filing this form.
	ii. The information furnished above on behalf of the person(s) filing this form is true to the best of the person(s)' knowledge. I understand that I may be liable for criminal prosecution for providing any false information in this application.
	A copy has been served on the other party at same time.
Name	
Signature	
Date (DD/MM/YYYY)	
No. of Extra Sheets Attached to this Form	sheet(s)

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GST	GST INFORMATION	
Tax Invoice*		
Note:		
Tax invoice will be issued to the entity/individual as indicated. 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.		
	The name of the Objector / Opponent (as in Part 4 of this form) is to be indicated in this field.	
Name (Tax invoice to be issued to)		

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