

**GEOGRAPHICAL INDICATIONS ACT 2014**  
**GEOGRAPHICAL INDICATIONS RULES 2019**

<b>FORM GI15</b>	<b>Notice of Attendance at Objection or Opposition Hearing</b>
<p><u>Pre-requisites:</u>            If you intend to attach any documents to this notice, please have a copy of the said documents ready.</p> <p><u>Estimated Time:</u>            This form may take approximately 1 – 4 minutes to complete.</p> <p><u>General</u>            a. * denotes mandatory fields.            b. Please note that any fee paid is not refundable.</p>	
<b>PART 1</b>	<b>Reference</b>
<p><b>Your Reference</b>            (if any)</p>	<input style="width: 100%; height: 25px;" type="text"/>
<p><b>IPOS Reference</b>            (if applicable)</p>	<input style="width: 100%; height: 25px;" type="text"/>
<b>PART 2</b>	<b>Geographical Indication (GI) No.*</b>
<p><b>GI No.*</b></p>	<input style="width: 100%; height: 25px;" type="text"/>
<p><b>Case No.*</b></p>	<input style="width: 100%; height: 25px;" type="text"/>
<b>PART 3</b>	<b>Details of Person Filing this Request for Attendance*</b>
<p><i>Note: If there is insufficient space, please use the continuation sheet in CS 4.</i></p>	
<p><b>UEN/ Company Code</b>            (if available)</p>	<input style="width: 100%; height: 25px;" type="text"/>
<p><b>Name</b></p>	<input style="width: 100%; height: 40px;" type="text"/>
<p><b>Address</b>            (please provide either a Singapore address or an overseas address)</p>	<p><u>Singapore address</u></p> <p><input type="checkbox"/> This Singapore address is to be used as the address for service for the purposes of this application.</p> <p>Block/ House No. <input style="width: 100%; height: 25px;" type="text"/></p> <p>Street Name <input style="width: 100%; height: 25px;" type="text"/></p> <p>Level - Unit <input style="width: 50%; height: 25px;" type="text"/> - <input style="width: 50%; height: 25px;" type="text"/></p> <p>Building Name <input style="width: 100%; height: 25px;" type="text"/></p>

	Postal Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
	<u>Overseas address</u> Line 1 <input type="text"/> Line 2 <input type="text"/> Line 3 <input type="text"/>
<p><i>(Please fill in the relevant fields under "Legal entity" or "Individual")</i></p> <p><b><u>Legal entity</u></b></p> <p><b>Country/Territory of Incorporation*</b> <input type="text"/></p> <p><b>State of incorporation</b> <i>(mandatory for US corporations)</i> <input type="text"/></p> <p><b>Sole proprietor's or partners' name(s)</b> <i>(if sole proprietorship or partnership)</i> <input type="text"/></p>	
<p><b><u>Individual</u></b></p> <p><b>Nationality*</b> <input type="text"/></p> <p><b>Country/Territory of Residency*</b> <input type="text"/></p>	
<p><b>Email Address</b></p> <p><i>(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.)</i></p>	<input type="text"/>
<p><b>PART 4</b> <b>Contact Details*</b></p>	
<p><u>Note:</u></p> <p>a. If an agent is appointed to act on behalf of the party filing this application/request, 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.</p> <p>b. If you have provided a Singapore address in Part 3 and checked the box in that field, you do not have to fill in this part.</p> <p>c. For the purpose of this proceeding, official correspondence will be sent to the address for service in Singapore as indicated in this part, or Part 3 if the Singapore address is to be used as the address for service.</p> <p>d. Please file Form GI4 if you are a different agent or Form GI5 if you have changed your address for service in Singapore.</p>	
<p><b>Agent UEN/ Company Code</b> <i>(if available)</i></p>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>

<b>Agent Name</b>	<input type="text"/>
<b>Representative or C/O Name</b> <i>(if applicable)</i>	<input type="text"/>
<b>Address for Service in Singapore</b>	<p>Block/ House No. <input type="text"/></p> <p>Street Name <input type="text"/></p> <p>Level - Unit <input type="text"/> - <input type="text"/></p> <p>Building Name <input type="text"/></p> <p>Postal Code <input type="text"/></p>
<b>Contact Person</b> <i>(if applicable)</i>	<input type="text"/>
<b>Direct Telephone No. in Singapore</b> <i>(if applicable)</i>	<input type="text"/>
<b>Email Address</b>	<input type="text"/>
<b>PART 5</b>	<b>Attendee Type</b>
<b>Party Name</b>	<input type="text"/>
<b>PART 6</b>	<b>Hearing Details</b>
<p><i>Note:</i> (1) - The relevant party to this action, for example, the opponent  (2) - Time  (3) - Date, ie DD/MM/YYYY  (4) - Agent Name</p>	
<p>I/ We, the <sup>(1)</sup> <input type="text"/> in this matter,  confirm that the hearing before the Registrar arranged for <sup>(2)</sup> <input type="text"/> (hours) on  <sup>(3)</sup> <input type="text"/> will be attended by me/ us or by my/ our agent  <sup>(4)</sup> <input type="text"/></p>	

<b>PART 7</b>	<b>Declaration*</b>										
<b>Declaration</b>	<p><b><u>By Person Filing the Form</u></b></p> <p>I, the undersigned, do hereby declare that:</p> <p>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.</p> <p><b><u>By Agent</u></b></p> <p>I, the undersigned, do hereby declare that:</p> <p>i. I have been duly authorised to act as an agent on behalf of the person(s) filing this form.</p> <p>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.</p>										
<b>Name</b>  <b>Signature</b>  <b>Date</b> <i>(DD/MM/YYYY)</i>	<div data-bbox="555 797 1369 860" style="border: 1px solid black; height: 28px; width: 100%;"></div> <div data-bbox="555 900 995 1016" style="border: 1px solid black; height: 52px; width: 60%; margin-top: 10px;"></div> <div data-bbox="555 1066 938 1128" style="border: 1px solid black; height: 28px; width: 100%; margin-top: 10px; text-align: center;"> <table border="1" style="border-collapse: collapse; width: 100%; height: 100%;"> <tr> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px; text-align: center;">/</td> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px; text-align: center;">/</td> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px;"></td> <td style="width: 12.5%; height: 28px;"></td> </tr> </table> </div>			/			/				
		/			/						
<b>No. of Extra Sheets Attached to this Form</b>	<div data-bbox="555 1182 756 1245" style="border: 1px solid black; width: 100%; height: 28px; display: inline-block;"></div> sheet(s)										

GST	GST INFORMATION
<b>Tax Invoice*</b>	
<p><i>Note:</i>  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.</p>	
<p><b>Name</b>  (Tax invoice to be issued to)</p>	<p>The name of the requestor (as in Part 3 of this form) should be inserted in this field.</p> <div data-bbox="544 629 1358 741" style="border: 1px solid black; height: 50px; width: 100%;"></div>

<b>Checklist</b>
<p><b>Please make sure you have:</b></p> <ul style="list-style-type: none"> <li>i. Signed and dated the form.</li> <li>ii. Paid the fee for this form or submitted instructions of such payment. <ul style="list-style-type: none"> <li>• For GIRO payment: Please provide instructions for IPOS to deduct the fee from your GIRO account with IPOS. To set up a new GIRO arrangement with IPOS, please refer to <a href="https://www.ipos.gov.sg/payment">https://www.ipos.gov.sg/payment</a>.</li> </ul> </li> </ul>