

GEOGRAPHICAL INDICATIONS ACT 2014
GEOGRAPHICAL INDICATIONS RULES 2019

FORM GI11	Request for Certified Hard Copy of Entry in Register or Certified Extract from Register
<p><u>Estimated time:</u> This form may take approximately 3 - 6 minutes to complete.</p> <p><u>Notes:</u> a. * denotes mandatory fields. b. The fee for this form is payable in respect of <u>each certified hard copy or certified extract</u>. Any fee paid is not refundable.</p>	
PART 1	Your reference
Your reference (if any)	<input style="width: 100%; height: 20px;" type="text"/>
PART 2	Geographical Indication No.*
Geographical Indication No.	<input style="width: 100%; height: 20px;" type="text"/>
PART 3	Party filing this request*
This form is filed by (Cross one box only)	<input type="checkbox"/> Applicant / Registrant of the abovementioned Geographical Indication No. <input type="checkbox"/> other party who is not the Applicant / Registrant of the abovementioned Geographical Indication No. (Please state the party's name below) Name <input style="width: 100%; height: 40px;" type="text"/>
PART 4	Nature of request*
Nature of request (Cross one box only)	<input type="checkbox"/> Certified copy of the application for registration <u>as it was applied for</u> <input type="checkbox"/> Certified copy of the application for registration or the registration <u>as it is now</u> <input type="checkbox"/> Certified extract of any other entry from the register (Please specify the entry in the register to be extracted) <input style="width: 100%; height: 60px;" type="text"/>
PART 5	Number of copies*
<p><u>Notes:</u> The fee payable is in respect of <u>each certified hard copy or certified extract</u>.</p>	
Number of copies required	<input style="width: 100%; height: 20px;" type="text"/>

PART 6**Contact details***Notes:

- a. If an agent is appointed to act on behalf of the party filing this 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.
- b. Official correspondence relating to this request will be sent to the address for service in Singapore as indicated herein.

**Agent UEN /
Company Code**

(if available)

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Agent Name

**Representative or
C/O Name**

(if applicable)

**Address for Service
in Singapore**

Block / House No.

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Street Name

Level - Unit

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Building Name

Postal Code

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Contact Person

**Direct Telephone
No. in Singapore**

(if available)

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Email Address

(if available)

By providing an email address, you consent that we may contact you by email in relation to this request.

GST	GST INFORMATION
Tax invoice*	
<p><i>Notes:</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>Name (Tax invoice to be issued to)</p>	<p>The name of the party filing the request (as indicated in Part 3 of this form) is to be specified in this field.</p> <div data-bbox="560 495 1374 607" style="border: 1px solid black; height: 50px; width: 100%;"></div>

Checklist
Please make sure you have signed and dated the form.