

GEOGRAPHICAL INDICATIONS ACT 2014
GEOGRAPHICAL INDICATIONS RULES 2019

FORM GI4	Application, by Any Person Other Than the Registrant, to Rectify Entry in Register or Cancel Registration of Geographical Indication										
<p><u>Pre-requisites:</u></p> <p>a. Please prepare a statement of the ground(s) relied upon for this application for cancellation or rectification.</p> <p style="padding-left: 20px;">i. For an application for cancellation, the ground(s) relied upon must relate to one or more of the grounds specified in section 52(2) of the Geographical Indications Act 2014.</p> <p><u>Estimated time:</u></p> <p>This form may take approximately 5-10 minutes to complete.</p> <p><u>Notes:</u></p> <p>a. * denotes mandatory fields.</p> <p>b. Please note that any fee paid is not refundable.</p>											
PART 1	Your reference										
Your reference <i>(if any)</i>	<div style="border: 1px solid black; height: 25px; width: 100%;"></div>										
PART 2	Geographical Indication No.*										
Geographical Indication No.	<div style="border: 1px solid black; height: 25px; width: 100%;"></div>										
PART 3	Nature of this application*										
Nature of this application <i>(Cross one box only)</i>	<p><input type="checkbox"/> Cancellation of registration</p> <p><input type="checkbox"/> Rectification of an error or omission in the register</p>										
PART 4	Supporting documents*										
<p><u>Notes:</u></p> <p>a. It is mandatory to provide a statement of the ground(s) relied upon for this application for cancellation or rectification. You may also provide additional evidence in support of your application.</p> <p>b. 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.</p> <p><input type="checkbox"/> The statement of ground(s) is attached.</p> <p><input type="checkbox"/> 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.</p>											
PART 5	Particulars of party filing this application*										
<p><u>Notes:</u></p> <p>If there is more than one applicant filing this application for cancellation or rectification, please provide the particulars of the remaining applicant(s) in the continuation sheet CS1.</p>											
UEN / Company Code <i>(if available)</i>	<table border="1" style="width: 100%; height: 25px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>										
Name	<div style="border: 1px solid black; height: 50px; width: 100%;"></div>										

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/request.

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/Territory of incorporation*

State of incorporation
(mandatory for US corporations)

Sole proprietor's or partners' name(s)
(if sole proprietorship or partnership)

Individual

Nationality*

Country/Territory of residency*

PART 6	Contact details*
<p><i>Notes:</i></p> <p>a. If you have provided a Singapore address in Part 5 and checked the box in that field, you do not have to fill in this part.</p> <p>b. If an agent is appointed to act on behalf of the applicant for 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.</p> <p>c. Official correspondence relating to this application will be sent to the address for service in Singapore indicated in this Part or in Part 5, where applicable. Failure to provide an address for service in Singapore may result in this application being treated as withdrawn.</p>	
<p>Agent UEN / Company Code <i>(if available)</i></p> <p>Agent Name</p>	<p><input type="text"/></p> <p><input type="text"/></p>
<p>Representative or C/O Name <i>(if applicable)</i></p>	<p><input type="text"/></p>
<p>Address for Service in Singapore</p>	<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>
<p>Contact Person</p> <p>Direct Telephone No. in Singapore <i>(if available)</i></p> <p>Email Address <i>(if available)</i></p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><i>By providing an email address, you consent that we may contact you by email in relation to this application.</i></p>

PART 8	Declaration*
<p>Declaration</p>	<div data-bbox="555 170 619 232" style="border: 1px solid black; width: 40px; height: 28px; display: inline-block; margin-right: 10px;"></div> <p>I declare that there is no action concerning the geographical indication in question pending in the Court.</p> <p><u>By party filing the application</u></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><u>By agent</u></p> <p>I, the undersigned, do hereby declare that:</p> <ul style="list-style-type: none"> i. I have been duly authorised to act as an agent, for the purpose of this application, on behalf of the party filing the application. ii. The information furnished above on behalf of the party filing the application is true to the best of his/her knowledge. The party understands that he/she may be liable for criminal prosecution for providing any false information in this application.
<p>Name</p> <p>Signature</p> <p>Date (DD/MM/YYYY)</p>	<div data-bbox="545 824 1388 887" style="border: 1px solid black; width: 528px; height: 28px; margin-bottom: 10px;"></div> <div data-bbox="545 913 983 1025" style="border: 1px solid black; width: 274px; height: 50px; margin-bottom: 10px;"></div> <div data-bbox="545 1052 925 1115" style="border: 1px solid black; width: 238px; height: 28px; display: flex; justify-content: space-between;"> </div>

GST	GST INFORMATION
Tax invoice*	
<p><i>Notes:</i></p> <p><i>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.</i></p>	
<p>Name</p> <p>(Tax invoice to be issued to)</p>	<p><i>The name of the party filing the application (as indicated in Part 5 of this form) is to be specified below.</i></p> <div data-bbox="544 504 1369 645" style="border: 1px solid black; height: 63px; width: 100%;"></div>

Checklist
<p>Please make sure you have:</p> <ol style="list-style-type: none"> i. Signed and dated the form. ii. Attached the statement of the grounds relied upon for the application for cancellation/rectification. iii. Paid the fee for this form or submitted instructions of such payment. <ul style="list-style-type: none"> • 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 https://www.ipos.gov.sg/payment. iv. Served on the registrant a copy of this application and the supporting documents at the same time you file these documents with the Registrar.