

GEOGRAPHICAL INDICATIONS ACT 2014
GEOGRAPHICAL INDICATIONS RULES 2019

FORM GI6	Application to Change or Correct Name, Address, Singapore Address for Service, or Other Particulars of Applicant, Registrant, Agent or Other Party in the Register
<p><u>Estimated time:</u> This form may take approximately 5 - 8 minutes to complete.</p> <p><u>Notes:</u> a. * denotes mandatory fields. b. Please note that any fee paid is not refundable. c. If you wish to apply to change the registrant of a geographical indication, please file Form GI10 instead.</p>	
PART 1	Your reference
Your reference <i>(if any)</i>	<input style="width: 100%; height: 20px;" type="text"/>
PART 2	Party affected by the change or correction*
<p><u>Notes:</u> Each application may only be filed to change and/or correct the particulars of <u>one</u> party.</p>	
Affected party <i>(Cross one box only)</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Applicant, Registrant, or other Interested Party
UEN / Company Code <i>(if available)</i>	<input style="width: 100%; height: 20px;" type="text"/>
Name	<input style="width: 100%; height: 40px;" type="text"/>
PART 3	Type of change or correction
<p><u>Notes:</u> You may apply for more than one type of change and/or correction as long as they pertain to the same party indicated in Part 2.</p>	
PART 3A	Change/Correction of name
<p><u>Notes:</u> In respect of a change in the name of the affected party: This form is only applicable if the change in name <u>does not change the legal entity of the party</u>. If there is a change in the legal entity, please file the other relevant form (e.g. to change the registrant on record, please file Form GI10 instead to transfer the registration of the geographical indication to another party).</p>	
New name of the affected party	<input style="width: 100%; height: 40px;" type="text"/>
New name of sole proprietor or partner <i>(where the affected party is a sole proprietorship or a partnership)</i>	<input style="width: 100%; height: 40px;" type="text"/>

PART 3B	Change/Correction of address
<p>New address (Please provide <u>either</u> a Singapore address or an overseas address)</p>	<p><u>Singapore address</u></p> <p>Block / House No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Street Name <input type="text"/></p> <p>Level - Unit <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Building Name <input type="text"/></p> <p>Postal Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p><i>Note: Please ensure that the address for service is also updated, if applicable, under Part 3C.</i></p> <p><u>Overseas address</u></p> <p>Line 1 <input type="text"/></p> <p>Line 2 <input type="text"/></p> <p>Line 3 <input type="text"/></p>
PART 3C	Change/Correction of address for service in Singapore
<p><u>Notes:</u> This part is not applicable for changing or correcting the address for service in relation to a matter which is represented by an agent.</p> <p>i. As the agent's address is treated as the address for service in connection with the matters he has been authorised to act, the affected party in Part 2 should be the agent and the agent's new address in Singapore should be filled under Part 3B. The agent's new address will be updated for all matters for which the agent has been authorised to act.</p> <p>ii. If you would like to discharge the agent and record your Singapore address as the address for service, please file Form GI5 instead.</p>	
<p>New representative or C/O name (if applicable)</p>	<input type="text"/>
<p>New address for service in Singapore</p>	<p><input type="checkbox"/> This address for service is to be used for contact purposes in relation to this application.</p> <p>Block / House No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Street Name <input type="text"/></p> <p>Level - Unit <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Building Name <input type="text"/></p> <p>Postal Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>

PART 3D	Change/Correction of other particulars
<p><u>Notes:</u></p> <p>a. Please fill in the relevant fields under "Legal entity" or "Individual".</p> <p>b. This form is only applicable if the change/correction to the particulars of the party indicated in Part 2 <u>does not change the legal entity</u> of the party. If there is a change in the legal entity, please file the other relevant form (e.g. to change the registrant on record, please file Form GI10 instead to transfer the registration of the geographical indication to another party).</p>	
<p><u>Legal entity</u></p> <p>Country/Territory of incorporation* <input data-bbox="520 456 1394 517" type="text"/></p> <p>State of incorporation <i>(mandatory for US corporations)</i> <input data-bbox="520 551 1394 611" type="text"/></p>	
<p><u>Individual</u></p> <p>Nationality* <input data-bbox="520 703 1390 763" type="text"/></p> <p>Country/Territory of residency* <input data-bbox="520 797 1394 857" type="text"/></p>	
PART 4	Affected geographical indication(s)
<p><u>Notes:</u></p> <p>a. Please choose if the change or correction is to be effected for all valid geographical indication(s) or only selected geographical indication(s) with the particulars of the affected party.</p> <p>b. If the affected party is an agent, please skip this part. The change or correction (if allowed) will be effected for all valid geographical indications for which the agent is appointed.</p>	
<p>The change/correction is effective for</p>	<p><input data-bbox="552 1122 611 1182" type="checkbox"/> All valid geographical indication(s)</p> <p><input data-bbox="552 1211 611 1272" type="checkbox"/> Selected geographical indications</p> <p>Please state the Geographical Indication No.:</p> <input data-bbox="647 1305 1222 1366" type="text"/> <input data-bbox="647 1395 1222 1456" type="text"/> <input data-bbox="647 1485 1222 1545" type="text"/> <p>Please use the continuation sheet CS3 if the fields above are insufficient.</p>
PART 5	Effective date
<p><u>Notes:</u></p> <p>a. Please specify the date on which the change or correction should take effect. The effective date must be any date that is up to one month from the day this form is filed.</p> <p>b. If an effective date is not indicated, the change or correction will take effect on the day this form is filed.</p>	
<p>Effective date</p>	<p><input data-bbox="552 1805 935 1865" type="text"/></p> <p>(DD/MM/YYYY)</p>

PART 6	Contact details*
<p><i>Notes:</i></p> <p>a. If an agent is appointed to act on behalf of the registrant 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>b. If you have provided a Singapore address for service in Part 3C and checked the box in that field, you do not have to fill in this part.</p> <p>c. Official correspondence relating to this application will be sent to the address for service in Singapore as indicated in this Part or in Part 3C, where applicable.</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 7	Declaration*
<p>Declaration</p>	<p><u>By affected party indicated in Part 2</u></p> <p>I, the undersigned, do hereby declare that:</p> <ul style="list-style-type: none"> i. Where the request is made to change the name or other particulars on record, the change does not pertain to the legal entity. ii. 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><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 indicated in Part 2. ii. Where the request is made to change the name or other particulars of the party in the register, the party declares that the change does not pertain to its legal entity. iii. The information furnished above on behalf of the party is true to the best of that party's knowledge. He/She 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="552 1003 1390 1061" style="border: 1px solid black; height: 26px; width: 525px;"></div> <div data-bbox="552 1093 1038 1211" style="border: 1px solid black; height: 53px; width: 305px;"></div> <div data-bbox="552 1238 935 1299" style="border: 1px solid black; display: flex; width: 240px; height: 27px;"> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> <div style="width: 20px; height: 27px;"></div> </div>

GST	GST INFORMATION
Tax invoice*	
<p><u>Notes:</u></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 (Tax invoice to be issued to)</p>	<p><i>The name of the party filing the application (as indicated in Part 2 of this form) should be specified in this field.</i></p> <div data-bbox="544 546 1358 663" style="border: 1px solid black; height: 50px; width: 100%;"></div>

Checklist
<p>Please make sure you have:</p> <ul style="list-style-type: none"> i. Signed and dated the form. ii. 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.