TRINIDAD AND TOBAGO TRADE MARKS ACT

Regulation 53(1)(a)

THE TRADE MARKS REGULATIONS, 2020

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| **FORM TM 12 APPLICATION TO REGISTER A CHANGE OF OWNERSHIP** |
| *General instructions*1. *If there is not enough space to fill in any part of this form, please use separate sheets.*
2. *For change of ownership of an international registration designating Trinidad and Tobago, use WIPO form .*
3. *The fee for this form is payable on a per trade mark number basis.*
 |
| 1. Please indicate if this application is for a full assignment, partial assignment or merger*[Note: Partial assignment means assignment of only some of the rights in the trade mark (e.g., some goods or services or export rights) to the new proprietor]*Full Assignment Partial Assignment Merger |
| 2. Trade Mark Number(s) |
| 3. Particulars on record of a current registered proprietor/applicant for registration Company Number(if applicable)Name |

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| Address, Contact Information, Email Address(Mandatory)Citizenship or Country of incorporation/ constitutionLegal Nature of Legal EntitySole Proprietor or Partners’ name(s) (if sole proprietorshipor partnership) | State of incorporation (where applicable) |
| 4. Particulars to be recorded of subsequent registered proprietor/applicant for registration |
| *Note:* |
| *For a partial assignment, where the transfer has the effect of vesting rights in relation to different parts of the* |
| *goods or services on different parties, please ignore this portion (i.e., Part 4) and fill up the corresponding boxes* |
| *(i.e., Parts 1 and 2) of the Annex instead.* |
| Company Number |
| (if applicable) |
| Name |
| Address, Contact |
| Information, Email |
| Address (Mandatory) |
| Citizenship or State of |
| Country of incorporation |
| incorporation/ (where applicable) |
| constitution |

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| Legal Nature of Legal EntitySole Proprietor or Partners’ name(s) (if sole proprietorship or partnership) |
| 5. Date subsequent registered proprietor/applicant for registration took over ownership- -Day Month Year |
| 6. Address for service of subsequent registered proprietor/applicant for registration*Note:**The address for service must be a Trinidad and Tobago address. It is effective for all proceedings in respect of the trade mark including this application for change of ownership.*Reference Number(if applicable)NameAddress, Contact Information, Email Address (Mandatory) |
| 7. Please select one of the following boxes: |
| (i) | This application is signed by or on behalf of all relevant parties |
| (ii) | The original certified copy of the documentary evidence establishing the transaction is attached |

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| 8. Provide below the signatures for the authorisation to the change in ownershipSignature of current registered proprietor/ applicant for registration(or his representative or agent if so authorised)  |
| Status of signatory Name (block letters)Date |    |
| 8A. Signature of subsequent registered proprietor/ applicant for registration(or his representative or agent if so authorised) |   |
| Status of signatory |   |
| Name (block letters) |   |
| Date |   |
| Number of extra sheets attached to this form |

ANNEX TO FORM TM 12

(FOR PARTIAL ASSIGNMENT ONLY)

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| 1. Particulars to be recorded of Subsequent Proprietor 1

*Note: Subsequent Proprietor 1 here refers to:** 1. *current registered proprietor/applicant for registration in a situation where current registered proprietor/applicant for registration retains ownership of trademark in relation to part of the goods/services/rights; or*
	2. *one of the subsequent proprietors where current registered proprietor/applicant for registration ha divested all his rights in the trademark to different parties and does not retain any ownership of the trademark.*
 | *s* |
| Company Number(if applicable) |  |  |  |
| NameAddress, Contact Information, Email Address(Mandatory) |  |  |  |
| Citizenship or Country of incorporation/ constitution |  | State of incorporation (where applicable) |  |
| Legal Nature of Legal Entity |  |  |  |
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| *Sole Proprietor or Partners’ name(s) (if sole proprietorship or partnership)* |  |  |  |

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| Particulars of Goods/Services/Rights to be transferred to/retained by Subsequent Proprietor 1.*Notes:* *If the space provided is insufficient, please continue on separate sheets.* |
|  Goods/services claimed in the following trade mark number(s) and class(es): |
|  Trade Mark Number(s) Class Number(s) |
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|  The following goods/services/rights only: |
|  Trade Mark Number(s)  |  |  |
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|  Class Number(s)  |  |
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|  Class Number |  |  |
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| 2. Particulars to be recorded of Subsequent Proprietor 2 (*where there are more than two subsequent proprietors, please provide the corresponding particulars for all the other subsequent proprietors in an attached sheet*) |
| Company Number(if applicable) |  |  |
| NameAddress, Contact Information, Email Address (Mandatory) |  |  |
| Citizenship or Country of incorporation/ constitution |  | State of incorporation (where applicable) |

Legal Nature of Legal Entity

*Sole Proprietor or Partners’ name(s) (if sole proprietorship or partnership*

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| 1. Particulars of Goods/Services/Rights to be transferred to Subsequent Proprietor 2

*Notes:* *If the space provided is insufficient, please continue on separate sheets.* |
|  Goods/services claimed in the following trade mark number(s) and class(es): |
|  Trade Mark Number(s) Class Number(s) |
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|  The following goods/services/rights only: |
| Trade Mark Number(s)  |  |  |
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| Class Number(s)  |  |  |
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|  Class Number |  |  |
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| 4. Provide below an authorisation to the change in ownership |
| Signature of Subsequent Proprietor 1(or his representative or agent if so authorised) Status of signatory Name (block letters) Date  |
| Signature of Subsequent Proprietor 2(or his representative or agent if so authorised) Status of signatory Name (block letters) Date  |
|  |
| Number of extra sheets attached to this form |