TRINIDAD AND TOBAGO TRADE MARKS ACT

Regulation 23(2) Regulation 26 Regulation 44(2) Regulation 44(3) Regulation 54(4) Regulation 62(1) Regulation 64(1)(a)

THE TRADE MARKS REGULATIONS, 2020

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| **FORM TM 6** | | **NOTICE OF OPPOSITION** |
| *General Instructions* | | |
| *(a)* | *If there is not enough space to fill in any part of this form, please use separate sheets.* | |
| *(b)* | *If the Notice of Opposition relates to an international registration designating Trinidad and Tobago, the*  *international registration number must be given, in addition to the trade mark number and class number(s).* | |
| *(c)* | *The fee for this form is payable on a per trade mark number basis.* | |
| 1. This opposition relates to:  *(tick one box only)*  a pending trade mark application  a pending collective mark application or certification mark application an amendment of a pending trade mark application after publication an alteration of a registered trade mark  an amendment of regulations governing the use of a collective mark or certification mark  the removal of any matter from the Register | | |
| |  | | --- | |  |   2. Trade Mark Number   |  | | --- | |  |   International Registration Number   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |   Class number(s) this opposition relates to   |  | | --- | |  |   Total number of classes this  opposition relates to | | |

|  |  |
| --- | --- |
| 3. Particulars of opponent | |
| Company Number  (if applicable) | |
|  | |
| Name | |
|  | |
| Address, Contact | |
| Information, | |
| Email Address | |
| (Mandatory) | |
| Citizenship or | |
| Country of  incorporation/ | State of  incorporation |
| constitution |  |
| Legal Nature of  Legal Entity | |
|  | |
| Sole Proprietor or | |
| Partners’ name(s) | |
| (if sole | |
| proprietorship | |
| or partnership) | |
|  | |
| 4. Address for service | |
| *Note:* | |
| *The address for service must be a Trinidad and Tobago address.* | |
| Reference Number | |
| (if applicable) | |
| Name | |
| Address, Contact  Information, Email  Address (Mandatory) | |

|  |
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| 5. Grounds of opposition |
| Signature Date -- ---------- ----  Day Month Year  Name Tel. No:  (block letters)  Email Address:  Status of Signatory |
| Number of extra sheets attached to this form |

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