

**TRINIDAD AND TOBAGO
TRADE MARKS ACT**

Regulation 35(3)

THE TRADE MARKS REGULATIONS, 2020

FORM TM 8	NOTICE TO THE CONTROLLER OF ATTENDANCE AT HEARING										
<p><i>General instructions</i></p> <p>(a) <i>If there is not enough space to fill in any part of this form, please use separate sheets.</i></p> <p>(b) <i>“Applicant” refers to an applicant for a trade mark or an applicant for revocation, invalidation or rectification. “Opponent” refers to the person filing an opposition to a trade mark application. “Respondent” refers to the person responding to an application for revocation, invalidation or rectification.</i></p> <p>(c) <i>If the hearing relates to an international registration designating Trinidad and Tobago or a protected international trade mark in Trinidad and Tobago, the international registration number must be given, in addition to the trade mark number and class number.</i></p> <p>(d) <i>The fee for this form is payable on a per trade mark number basis.</i></p>											
1. Trade Mark Number in respect of which the hearing is being held	<input style="width: 100%; height: 25px;" type="text"/>										
International Registration Number	<input style="width: 100%; height: 25px;" type="text"/>										
Class number(s) in respect of which the hearing is being held	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td><td style="width: 10%; height: 25px;"></td></tr></table>										
Total number of classes in respect of which the hearing is being held	<input style="width: 50px; height: 25px;" type="text"/>										

2. Reason for hearing

(tick where appropriate)

- Opposition to application for registration/protection
- Revocation of registration/protection
- Declaration of invalidity of registration/protection
- Rectification of the Register
- Opposition to amendment of regulations governing the use of a collective mark or certification mark
- Other matters
(Please specify)

3. I, the _____ in the matter indicated at Part 2
(applicant/opponent/respondent/other)

confirm that the hearing before the Controller arranged for _____ hours
(insert time)

on - - will be attended by me/us or by
Day Month Year

my agent _____
(insert name of agent)

Signature _____ Date _____
Day Month Year

Name _____ Tel. No: _____
(block letters) Applicant/Opponent/Respondent/Agent

Address,
Contact
Information,
Email Address _____
(Mandatory)

Status of Signatory _____

Number of extra sheets attached to this form