



Request to be registered as a trademark representative with BIP SXM

Mail to: info@bip.sx
www.bip.sx

Request to be registered as a trademark representative with BIP SXM¹

Last Name

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First Name

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Company name (*if applicable*)

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Business address

Street

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City

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Country

- Sint Maarten

E-mail

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Telephone

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Fax (*if applicable*)

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I comply with article 15 of the amended Trademark Ordinance (AB 2014, no. 83) in Dutch:

'Merkenlandsverordening', since I am²:

an Attorney at law or Notary practicing in Sint Maarten;

a professional in the field of trademarks established in Sint Maarten and registered as such at the Chamber of Commerce Sint Maarten³;

employed by a company established in Sint Maarten that specializes in trademarks and the registration thereof and registered as such at the Chamber of Commerce Sint Maarten⁴.

I am aware of the fact that BIP SXM will publish my personal data on its website after my registration as a trademark representative.

Signature

Name

Date

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Place

Signature

•

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1. Please send a scan of this completed and signed form and (*if applicable*) the requested annexes by e mail to: info@bip.sx

2. Please click the applicable box

3. Please provide an excerpt from the Chamber of Commerce Sint Maarten (no older than 6 months)

4. Please provide an excerpt from the Chamber of Commerce Sint Maarten (no older than 6 months)