

Search form

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

1 Contact information

Reference

•

Contact person

•

Telephone

•

E-mail

•

2 Bank details (see explanatory notes)

Bank account number

•

IBAN code

•

In the name of

•

BIC code

•

3 Applicant

Surname and first name, or corporate name and legal form

•

Address

•

House number

•

Zip code

•

City

•

Country

•

P.O. Box (optional, see explanatory notes)

•

Zip code

•

City

•

Country

•

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4 Representative

Name

•

Company name *(if applicable)*

•

Address

•

House number

•

Zip code

•

City

•

Country

•

5 Type of trademark

Word mark

6 Representation of the trademark

Please indicate the wordmark in the appropriate box.

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7 List of goods and/or services *(see explanatory notes)*

Class number(s)	Description
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8 Fees

Search

XCG

Basic fee

Supplementary fee for each class after the third class

Total

9 Payment *(see explanatory notes)*

I will transfer the full amount to your account

Debiting your current account with BOIP

BOIP number:

10 Attachment(s) *(see explanatory notes)*

•

11 Signature

Name

Date

•

•

Position

Signature

•

•