Trade Mark Search Report (Including Registration Availability Report)

TM2

Please complete this form in BLOCK CAPITALS. ALL QUESTIONS 1-6 must be completed (where applicable)

QUESTION 1

NOT AVAILABLE FOR EUROPEAN UNION REGISTRATIONS

Contact Name:

Daytime Telephone:

Account No:

Address to which correspondence should be sent:

QUESTION 2

Trade Mark Name:

Style / Logo or Design, etc

(Please enclose samples / letterheading / brochures, etc. If possible.)

QUESTION 3

Description of Business / Service / Usage, etc.

QUESTION 4

What class(es) do you think your nature of business should be included in?

If unsure, leave blank.

QUESTION 5

Have you ever used the mark previously?

Yes ☐ No ☐

If Yes, please give full details and enclose any samples, Letterheadings, Brochures, etc

QUESTION 6

Do you require your Trade Mark to have any limitations, ie. a logo to be registered in a special colour?

Yes ☐ No ☐

If yes, please give full details

COSTS

Please return with payment of £150 + £30 VAT = £180

Plus £15 + £3 VAT = £18 per additional class

Send your completed form with a cheque payable to National Business Register LLP at the address below. Alternatively, you may pay by credit card. Please complete the following details:

Cardholder's Name:
(exactly as card)

Cardholder's E-Mail Address:

Cardholder's House Number:
(as statement address)

Cardholder's Postcode:

Card Number:

Card Security Number:
(last 3 digits on signature strip)

IF PRESENT ON CARD

Card Issue Number:

Card Start Date:

Card Expiry Date:

Card Type (Please tick):

☐ VISA ☐ MASTERCARD ☐ MAESTRO ☐ SOLO

National Business Register TRADE MARKS

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