



Application for UK Trade Mark registration

Please complete this form in BLOCK CAPITALS. ALL STEPS 1-10 must be completed (where applicable)

STEP 1

Contact Name:

Daytime Telephone No:

Address to which correspondence should be sent:

Postcode

STEP 2

Insert the name(s) and address/es of the owner/s of the mark.
If it is a Company insert the registered office address and registration number at STEP 3

Name

Address

Postcode

Name

Address

Postcode

Name

Address

Postcode

Name

Address

Postcode

STEP 3

Company Name:

Registered Office Address:

Postcode

Incorporation No:

STEP 4

Trade Mark Name:

Style / Logo or Design, etc

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

STEP 5

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

If unsure, leave blank.

STEP 6

Does the application need to be in any extra classes?

Yes No

If Yes, please insert

STEP 7

Is it a collective mark?

Yes No

A collective Mark is to indicate who is entitled to use it, ie. the member of an organisation that owns the mark.

STEP 8

Is it a certification mark?

Yes No

A certification Mark is to indicate goods or services comply with certain standards ie safety or quality, etc.

STEP 9

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

Yes No

STEP 10

Any other relevant information or limitation details?

Multiple empty text boxes for providing additional information or limitation details.

COSTS

1) Application Fee £382.50 Plus £42.50 VAT = £425 (part zero rated)
(plus £100 + £20 VAT = £120) per additional class.

Please note that additional fees may be incurred at either examination or publication if complications occur at either of these stages, for example, third party opposition, these possible fees are difficult to predict in advance.

Payable to: "National Business Register LLP"

Send to: Somerset House
6070 Birmingham Business Park
Birmingham
B37 7BF

Tel: 0121 678 9000 Fax: 0121 678 9002

If you wish to pay by credit or debit card please complete details below

Cardholder's Name:
(exactly as card)

Text input field for Cardholder's Name.

Cardholder's E-Mail Address:

Text input field for Cardholder's E-Mail Address.

Cardholder's House Number:
(as statement address)

Text input field for Cardholder's House Number.

Cardholder's Postcode:

Text input field for Cardholder's Postcode.

Card Number:

Card number input field with 16 individual boxes.

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

Text input field for Card Security Number.

Card Expiry Date:

Text input field for Card Expiry Date.

IF PRESENT ON CARD:

Card Issue Number:

Card Start Date:

Card Type (Please tick):

VISA

MASTERCARD

MAESTRO

SOLO

Signature

National Business Register LLP. Registered in England and Wales
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