TRADEMARK QUESTIONNAIRE

Name of Application Firm/Company/Trust/Individual		
Address of Applicant	A	
Type of Organization	Proprietorship Registered Partnership Registered Company Trust Association H.U.F	
Full Name of Signatory (On Behalf of Firm/Company/Trust/Individual)		
Designation of Signatory		
Nationality of Signatory		
Father's, Husband's Name of Signatory		
Residence Address of Signatory		
Age of Signatory		
Significance of the Mark, Brand Name		
Goods, Services (Exact)	Select Clas	s
Goods, Services (Exact)		
Goods, Services (Exact)		
Trade Description	Manufacturer Dealer Trader Merchant Service Provider	

User Date	
Date	
Place	
Electronic Signature as Full Name	
	Apply For Trademark