

**INTELLECTUAL PROPERTY CORPORATION OF MALAYSIA  
GEOGRAPHICAL INDICATIONS ACT 2022  
APPLICATION FOR GROUNDS OF REFUSAL**

<b>1 APPLICATION NO</b>									
<b>2 CLASS</b>									
<p><b>3 DATE OF REGISTRAR'S DECISION</b> Please state below the date of Registrar's letter conveying his refusal of the application</p> <div style="border: 1px solid black; height: 30px; width: 400px; margin: 10px auto;"></div> <p><b>Note:</b> The date on which the Registrar's written grounds of decision of the refusal is issued to the applicant shall be deemed the date of the Registrar's decision for the purpose of an appeal to Court. Any appeal to the Court shall be made within 1 month from the date the grounds of decision was issued to the applicant.</p>									
<p><b>4 NAME OF APPLICANT</b> (Please tick the box where applicable)</p> <p><input type="checkbox"/> No change from the existing record  <input type="checkbox"/> Different from the existing record</p> <p>[Please fill up the box below. Fee of RM30 (Fee Code GIA3) will be charged to change name of the applicant together with this request. Various changes can be made under one payment]</p> <div style="border: 1px solid black; height: 25px; width: 700px; margin: 5px auto;"></div>									
<p><b>5 ADDRESS OF APPLICANT</b> (Please tick the box where applicable)</p> <p><input type="checkbox"/> No change from the existing record  <input type="checkbox"/> Different from the existing record</p> <p>[Please fill up the box below. Fee of RM30 (Fee Code GIA3) will be charged to change address of the applicant together with this request. Various changes can be made under one payment]</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 25px;"></td> </tr> <tr> <td colspan="2" style="height: 25px;"></td> </tr> <tr> <td style="width: 50%; padding: 2px;">Postcode:</td> <td style="width: 50%; padding: 2px;">Town:</td> </tr> <tr> <td colspan="2" style="padding: 2px;">State/Country:</td> </tr> </table>					Postcode:	Town:	State/Country:		
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State/Country:									
<p><b>6 AGENT</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a</td> <td style="width: 35%;">Name:</td> <td style="width: 60%;"></td> </tr> <tr> <td style="text-align: center;">b</td> <td>Agent Code (if known)</td> <td></td> </tr> <tr> <td style="text-align: center;">c</td> <td>Agent's Reference</td> <td></td> </tr> </table> <p>Note: Fee of RM30 (Fee Code GIA27) will be charged if the agent is newly appointed</p>	a	Name:		b	Agent Code (if known)		c	Agent's Reference	
a	Name:								
b	Agent Code (if known)								
c	Agent's Reference								

**7 ADDRESS FOR SERVICE OF THE APPLICANT** (Please tick the box where applicable)

- No change from the existing record
- Different from the existing record

[Please fill up the box below. Fee of RM30 (Fee Code GIA27) will be charged for this request]

Postcode:	Town:
State/Country:	

**8 DECLARATION AND SIGNATURE**

- By the Applicant Filing the Form**

I, the undersigned, do hereby declare that the information furnished above is true to the best of my knowledge.

- By Agent** (An agent signing this form on behalf of the applicant shall satisfy himself as to the truth of the declaration)

I, the undersigned, do hereby declare that:

- i** I have been duly appointed and authorized to act as an agent on behalf of the applicant(s) who is filing this form.
- ii** the information furnished above on behalf of the applicant(s) who is filing this form is true to the best of the applicant(s)' knowledge.

Signature: .....

Name of signatory: .....

Official capacity of signatory: .....

(Examples: Authorized person, Director, Principal Officer of Applicant(s)/ Agent)

Date: .....

**Attention:**

**It is an offence under section 36 of the Geographical Indications Act 2022 to submit or causes to be submitted or makes a false entry to the Geographical Indications Office and that person may be liable to a fine not exceeding RM50,000 or to imprisonment for a term not exceeding 5 years or to both.**

**9 SCANNING SHEET**

(Self-calculation for payment of scanning services)

No	Name of Document	No of Page(s)	Amount (RM2 for each page)
<b>TOTAL PAGES AND AMOUNT TO PAY</b>			

- If more space is necessary, mark off this box and use an additional sheet

**10**

**PAYMENT DETAILS** [Note: This will depend on the method of payment accepted.]

Cash

Cheque (Cheque No.)

Credit Card

Local Order (LO No.)

Other, please specify