

Fee Code
GIA5

**INTELLECTUAL PROPERTY CORPORATION OF MALAYSIA
GEOGRAPHICAL INDICATIONS ACT 2022
APPLICATION TO ATTEND HEARING**

1 APPLICATION NUMBER				
2 DETAILS OF APPLICATION a) Class: b) Reason for Hearing <input type="checkbox"/> To overcome provisional refusal <input type="checkbox"/> other reason, please specify:..... 				
3 HEARING WILL BE ATTENDED BY <input type="checkbox"/> the applicant <input type="checkbox"/> the agent on the applicant's behalf Note: Please provide the Registrar with the authorization letter for hearing attended by the agent on behalf of the applicant.				
4 NAME OF APPLICANT (Please tick the box where applicable) <input type="checkbox"/> No change from the existing record <input type="checkbox"/> Different from the existing record [Please fill up the box below. Fee of RM30 (Fee Code GIA3) will be charged to change name of the applicant together with this application. Various changes can be made under one payment] <table border="1" style="width: 100%;"><tr><td> </td></tr></table>				
5 ADDRESS OF APPLICANT (Please mark off box which is applicable) <input type="checkbox"/> No change from the existing record <input type="checkbox"/> Different from the existing record [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] <table border="1" style="width: 100%;"><tr><td> </td></tr><tr><td> </td></tr><tr><td>Postcode: Town:</td></tr><tr><td>State/Country:</td></tr></table>			Postcode: Town:	State/Country:
Postcode: Town:				
State/Country:				

6 **AGENT**

a	Name:	
b	Agent Code	
c	Agent's Reference	

Note: Fee of RM30 (Fee Code GIA27) will be charged if the agent is newly appointed

7 **ADDRESS FOR SERVICE OF THE APPLICANT** (Please mark off box which is 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:

a) I have been duly appointed and authorized to act as an agent on behalf of the applicant(s) who is filing this form.

b) 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	<p>SCANNING SHEET (Self-calculation for payment of scanning services)</p> <table border="1" data-bbox="285 415 1453 625"> <thead> <tr> <th data-bbox="285 415 378 520">No</th> <th data-bbox="378 415 1141 520">Name of Document</th> <th data-bbox="1141 415 1260 520">No of Page(s)</th> <th data-bbox="1260 415 1453 520">Amount (RM2 for each page)</th> </tr> </thead> <tbody> <tr> <td data-bbox="285 520 378 552"></td> <td data-bbox="378 520 1141 552"></td> <td data-bbox="1141 520 1260 552"></td> <td data-bbox="1260 520 1453 552"></td> </tr> <tr> <td data-bbox="285 552 378 583"></td> <td data-bbox="378 552 1141 583"></td> <td data-bbox="1141 552 1260 583"></td> <td data-bbox="1260 552 1453 583"></td> </tr> <tr> <td colspan="2" data-bbox="285 583 1141 625">TOTAL PAGES AND AMOUNT TO PAY</td> <td data-bbox="1141 583 1260 625"></td> <td data-bbox="1260 583 1453 625"></td> </tr> </tbody> </table> <p data-bbox="285 636 1141 667"><input type="checkbox"/> If more space is necessary, mark off this box and use an additional sheet</p>				No	Name of Document	No of Page(s)	Amount (RM2 for each page)									TOTAL PAGES AND AMOUNT TO PAY			
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TOTAL PAGES AND AMOUNT TO PAY																				
10	<p>PAYMENT DETAILS [Note: This will depend on the method of payment accepted.]</p> <p data-bbox="326 800 841 831"><input type="checkbox"/> Cash <input type="checkbox"/> Cheque (Cheque No.)</p> <p data-bbox="326 848 841 879"><input type="checkbox"/> Credit Card <input type="checkbox"/> Local Order (LO No.)</p> <p data-bbox="326 896 591 928"><input type="checkbox"/> Other, please specify</p> <div data-bbox="964 785 1453 947" style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px;"></div> </div>																			