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
☐ To overcome provisional refusal
☐ other reason, please specify:……..……..

……
……..

……
……..

3 **HEARING WILL BE ATTENDED BY**

☐ the applicant
☐ 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)

☐ No change from the existing record
☐ 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]

5 **ADDRESS OF 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 GIA3) will be charged to change address of the applicant together with this request. Various changes can be made under one payment]

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 submits 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) ☐ 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

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