

**INTELLECTUAL PROPERTY CORPORATION OF MALAYSIA
GEOGRAPHICAL INDICATIONS ACT 2022
APPLICATION FOR REGISTRAR'S VERIFICATION**

1	REGISTRATION NUMBER:				
2	CLASS AND GOODS <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"><thead><tr><th style="width: 15%; text-align: center; padding: 5px;">Class</th><th style="text-align: center; padding: 5px;">Goods</th></tr></thead><tbody><tr><td style="height: 40px;"></td><td></td></tr></tbody></table>	Class	Goods		
Class	Goods				
3	DETAILS: Detail of the goods bearing the geographical indications which is similar to the registered geographical indications: Representation the geographical indications which is claimed similar to the registered geographical indications: Note: The application for Registrar's verification shall be supported by a statutory declaration. Please refer to Regulation 51 (2).				
4	NAME OF REGISTERED PROPRIETOR (Please mark off box which is applicable) ☐ No change from the existing Register ☐ Different from the existing Register [Please fill up the box below. Fee of RM30 (Fee Code GIA3) will be charged to change name of the Registered Proprietor together with this request. Various changes can be made under one payment				

5	ADDRESS OF REGISTERED PROPRIETOR (Please mark off box which is applicable)	
	☐ No change from the existing Register	
	☐ Different from the existing Register [Please fill up the box below. Fee of RM30 (Fee Code GIA3) will be charged to change address of the Registered Proprietor together with this request. Various changes can be made under one payment]	
	Postcode:	Town:
	State/Country:	
6	AGENT	
	a	Name:
	b	Agent Code (if known)
	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 REGISTERED PROPRIETOR (Please mark off box which is applicable)	
	☐ No change from the existing Register	
	☐ Different from the existing Register [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 Registered Proprietor 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 registered proprietor 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 registered proprietor who is filing this form. ii <u>the information furnished above on behalf of the registered proprietor who is filing this form is true to the best of the applicant(s)' knowledge.</u> Signature: _____ Name of signatory: _____ Official capacity of signatory: _____ (Examples: Authorized person, Director, Principal Officer of registered proprietor / 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)	<table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="width: 10%;">No</th><th style="width: 60%;">Name of Document</th><th style="width: 15%;">No of Page(s)</th><th style="width: 15%;">Amount (RM2 for each page)</th></tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2">TOTAL PAGES AND AMOUNT TO PAY</td><td> </td><td> </td></tr> </tbody> </table> ☐ If more space is necessary, mark off this box and use an additional sheet	No	Name of Document	No of Page(s)	Amount (RM2 for each page)													TOTAL PAGES AND AMOUNT TO PAY			
No	Name of Document	No of Page(s)	Amount (RM2 for each page)																			
TOTAL PAGES AND AMOUNT TO PAY																						
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																				