**Ennoble IP**

**IP Services Consultancy Firm**

**B-17, First Floor, Sector-6, Noida**

**201301, U.P.**

**Trademark Facilitation Form**

1. Trademark to be registered (Along with logo as separate attachment if any) : - ……………………………………………………………………………………..
2. Class in which trademark to be registered (leave blank if not known): - ……..........................................................................................
3. Name of the Applicant (Organisation or Individual) :- ……………………………………………………………………………………….
4. Address :- **…………………………………………………………………………………..**

…………………………………………………………………………………………………………………………………………

State…………………………………………………………….Pin Code………………………………………………………

1. Constitution of Applicant (Proprietorship /Partnership/Pvt ltd/LLP company/trust/NGO/SOCIETY/Individual):- ……………………………………………………

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1. Name of the proprietor / All partner or director's …………………………………………………………………….

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1. Goods/ Services :-……………………………………………………………………………………………………………..

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………………………………………………………………………………………………Attach Brochure, if you have.

1. If company is registered startup of India the please provide DPIIT/DIPP No-…………..

If Company is registered MSME of India then please provide Certificate of msme registration.

1. Website ……………….
2. Please indicate that whether you want to Protect Word / Logo or Both as Trademarks. Please note that seperate applications are to be filed for protecting Word Mark and Logo Mark. Government Fee for each application

Word: Yes/No

Logo: Yes/No

Both: Yes/No

1. Is your Trademark already in Commercial use? ……………..(Yes/No)

(Valid Proof if you have-Since when you are using the trademark)\* any document where date is mentioned(Leave blank if the trademark is proposed to be used)………………………………..…………………………………………………………………………………………………………………………………………

(Documents to provide for commercial use can be one of the below:

1. SALES/PURCHASE INVOICE

2. MOU WITH GOVT

3. MARKETING MATERIAL

4. SOCIAL MEDIA PRESENCE

5. Domain invoice

6. Other legal and valid documents where date and trademark should be clearly mentioned)

The undersigned authorized representative of the applicant also declares that all the information given herein above is true and correct to the best of his personal knowledge and belief and also understands that in the event of any information found to be untrue or incorrect, the contract of the said services is liable to be terminated forthwith.

Designation (Signature & Name of the authorized signatory)

Date -