

TO:

Cooper Grace Ward Level 21, 400 George Street, Brisbane 4000 GPO Box 834, Brisbane 4001 F 61 7 3231 8408T 61 7 3231 2408

W www.cgw.com.au

1. Applicant/Accountant details

Firm name:				
Contact name:				
Telephone:		Fax:		
Email address:				
Postal address:				
Suburb/City:	State:		Postcode:	
Street address:				
Suburb/City:	State:		Postcode:	

2. Intended registered owner details

Firm name:					
Contact name:					
Telephone:			Fax:		
Email address:					
Postal address:					
Suburb/City:	S	State:		Postcode:	
Street address:					
Suburb/City:	S	State:		Postcode:	

3. Trade mark

	Type of trade mark:	Word only	Black and white logo	Colour logo 🗌	
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4. Status of trade mark design

If the trade mark can be graphically represented, has a trade mark already been	Yes 🗌
designed?	No 🗌

5. Required documents

Design of the trade mark in an electronic format (jpeg)	
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6. Details of goods and services to which the trade mark is being used/or intended on being used in connection with (e.g. clothing, restaurant services)

7. Timeframe

Is trade mark application urgent?	Yes 🗌 No 📋
If yes, why is it urgent?	

8. We confirm the information in these instructions is correct.



- 9. We acknowledge that Cooper Grace Ward will provide us with an estimate of their fees to prepare the application to register the trade mark in accordance with these instructions and that if we authorise them to proceed with the following work following receipt of the fee estimate this will constitute an agreement to pay the nominated fees.
- 10. We acknowledge that lodgement of the application is no guarantee of successful registration of the trade mark.

Dated

(Signed on behalf of the applicant)