



Statement of Particulars

Trade Mark		Class	
Name of Applicant		Nationality	
		Mobile	
Proprietor <input type="checkbox"/>	Director <input type="checkbox"/>	Partner <input type="checkbox"/>	Others <input type="checkbox"/>
Name of Company			
Address		State	
		District	
		Pincode	
Website		Phone	
Email		Fax	
Trade Description		User Date	
Goods / Services		__/__/__	

As state above is true to the best of my knowledge, information and belief and I / We believe the same is true

Signature of the Applicant

Date

__/__/__