COMMONWEALTH OF DOMINICA INDUSTRIAL DESIGN ACT, NO. 2 OF 1998

APPLICATION FOR THE REGISTRATION OF AN INDUSTRIAL DESIGN

I/We	
(8	give name(s))
whose full postal address(es) is/are respective	ely
do hereby apply for the registration of an Indu	ustrial Design for
J 11 J	C
(ki	nd of product)
,	
ADDRESS FOR SERVICE	
AGENT	
Name and Address	
CREATOR (S) OF THE DESIGN	
complete only if accompanied	
by Form 1	
Name(s) and address(es)	

PRIORITY

Indicate date and number of earlier

I/We herewith submit or will submit within ninety days of the date of this application a certified copy of the earlier applications on which priority is based, and which is/are listed below:

application(s), the country where filed, and the name of the applicant(s) of the priority application(s)

CLASSES OF PRODUCT

(complete only if applicable)

DESCRIPTION

(give a short description of the visual features of the designs, indicating what parts of it are original)

GRAPHIC REPRESENTATION

(if supplied) - A photograph, drawing or other graphic representation of the said Industrial Design is

hereto annexed.

SPECIMEN

(if supplied) - A specimen of the article containing said
Industrial Design is submitted herewith

EXECUTION	- This application is executed on
	at
	by (or on behalf of the applicant by)

(signature

DATE SUBMITTED

(indicate date when being sent to the office)

Note- If this application if filed by an agent it must be accompanied by a Power of Attorney authorizing the agent to make the application.