

MADRID AGREEMENT AND PROTOCOL CONCERNING THE INTERNATIONAL REGISTRATION OF MARKS

REQUEST FOR CANCELLATION OF THE RECORDING OF A LICENSE

(Rule 20*bis* of the Common Regulations)

IMPORTANT

1. This form is to be used only to request the cancellation of the recording of a license. Where it is intended to request the **amendment** of a recording of a license, form MM14 must be submitted.
2. This request may be presented to the International Bureau directly by the holder or by the Office of the Contracting Party of the holder or by the Office of a Contracting Party with respect to which the license is granted.
3. One single form may be used to request the cancellation of the recording of the same license in respect of several international registrations of the name of the same holder.
4. A request for the cancellation of a license is exempt from the payment of a fee.

This cover page must not be sent to the International Bureau.

Madrid System – Contacts

Madrid Customer Service opening hours:
Monday – Friday, 9:00 a.m. to 6:00 p.m. (Geneva time)
Telephone: **+ 41 22 338 86 86**

Inquiries / submitting forms:
<http://www.wipo.int/madrid/en/contact/>

Mailing address

Madrid Operations Division
Madrid Registry
Brands and Designs Sector
World Intellectual Property Organization
(WIPO)
34, Chemin des Colombettes
1211 Geneva 20
Switzerland



REQUEST FOR CANCELLATION OF THE RECORDING OF A LICENSE

<u>For use by the holder</u>	<u>For use by the Office</u>
This request contains the following number of continuation sheets: Holder's reference:	Office's reference:

1 INTERNATIONAL REGISTRATION NUMBER(S)
(this form may be used for several international registrations of the same holder in respect of which the same license is recorded)

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2 NAME OF THE HOLDER
(as recorded in the International Register)

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3 LICENSEE
(as recorded in the International Register)

Name:

Address:

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E-mail address:

4 LICENSE(S) TO BE CANCELLED
(where there are several licenses recorded in respect of the international registrations(s), it should be clearly indicated which license(s) the cancellation concerns)

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5 SIGNATURE BY THE HOLDER AND/OR HIS REPRESENTATIVE

<p><u>Holder</u> (as recorded in the International Register)</p> <p><i>By signing this form, I declare that I am entitled to sign it under the applicable law:</i></p> <p>Name:</p> <p>Signature:</p>	<p><u>Representative of the holder</u> (as recorded in the International Register)</p> <p><i>By signing this form, I declare that I am entitled to sign it under the applicable law:</i></p> <p>Name:</p> <p>Signature:</p>
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OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE REQUEST

(where this request is presented through an Office)

Name of the Office:

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Name and signature of the official signing on behalf of the Office:

By signing this form, I declare that I am entitled to sign it under the applicable law:

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Name and e-mail address of the contact person in the Office:

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CONTINUATION SHEET

No: of

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