**Information Disclosure Form for Industrial Design**

|  |  |  |
| --- | --- | --- |
| **1** | **PARTICULARS OF APPLICANT(S)**  |  |
|  | Name of the applicant  |  |
|  | Address of the applicant  |  |
|  | Nationality of the applicant  |  |
|  | Country of Residence or Principal Place of Business |  |
|  | Telephone. No.  |  |
|  | Fax No. |  |
|  | Email: |  |
| **2** | **DESIGN DETAILS / REPRESENTATIONS/ SPECIMEN** |  |
|  | Title of DesignDesign Application Form is accompanied by:* three graphic representations
* three drawings or tracings
* a specimen of the industrial design

*Note: Please provide representation of the design suitable for reproduction as an attachment on blank sheets of strong paper to this form.* |  |
| **3** | **CLASSIFICATION AND INDICATION OF PRODUCTS** |  |
|  | *Note: Enter the class and subclass number in accordance with the International Classification for Industrial Designs.* *If the application is filed for the registration of 2 or more designs, please ensure that each of the designs intended to be applied fall within the same class.* |  |
| **1** | Class and Subclass |  |
| **2** | List of Products |  |
|  | **ADDRESS FOR SERVICE (*if applicable)*** |  |
|  | *Note: Full name and address in Mauritius to which correspondence is to be sent* |  |
| **1** | Name  |  |
| **2** | Address  |  |
| **3** | Telephone. No.  |  |
| **4** | Fax No |  |
| **5** | Email |  |
| **5** | **CREATOR** |  |
| **1.** | Applicant is the creatorYes / No |  |
| **2.****(a)** | If the applicant is not the CreatorName of Creator |  |
| **(b)** | Address of Creator |  |
| **(c)** | A statement justifying the applicant’s right to the design will be enclosed: Yes / No |  |
| **(d)** | The Creator does not wish to be named in the Certificate of Registration of Industrial Design in accordance with section 75(6) of the Industrial Property Act 2019.A declaration to that effect will be enclosed ***or*** will be filed by (date) |  |
| **6.** | **PRIORITY CLAIM (if any)** |  |
|  | The priority of an earlier application is claimed as follows:Country (*if the earlier application is a regional or international application, indicate the office with which it is filed*):  |  |
| **1** | Filing date |  |
| **2** | Application Number |  |
| **3** | The priority of more than one earlier application is claimed. Yes/ No |  |
| **4** | The certified copy of the earlier application is enclosed: Yes / No ORwill be furnished by |  |
| **7** | **DISCLOSURE TO BE DISREGARDED FOR PRIOR ART PURPOSES:** |  |
| **1** | Disclosure was due to acts of applicant or his predecessor in title  Date of disclosure  |  |
| **2** | Disclosure was due to abuse or rights of applicant or his predecessor in title Date of disclosure |  |
| **3** | A statement specifying full particulars of disclosure accompanies this Form: Yes / NoORIf ‘No’, the statement shall be filed **within one month** from the filing of the application. |  |
| **8** | **STATEMENT OF NOVELTY** |  |
|  | The novelty of the design resides in the ***shape and configuration*** of the articles as shown in the representations. The novelty of the design resides in the ***pattern and ornamentation*** applied to the article as shown in the representations.The novelty of the design resides in the ***shape and configuration*** and the ***pattern and ornamentation*** applied to the article as shown in the representations.Please tick or cross the correct box. |  |
| **9** | **DISCLAIMER** |  |
|  | No claim is made to any right of the exclusive use of letters, words and numerals appearing in the design.Please tick or cross the box. |  |
| **10** | **DEFERMENT OF PUBLICATION** |  |
|  | *Note: When a design is registered it will be published in the Gazette. If you do not wish to immediately have your design published upon registration, you can request for a deferment of publication for a specified period not exceeding 12 months from the date of filing or priority date, whichever is applicable.* Deferment of publication (under section 76 (3) (b) of the Act) till  | (date)……………….. |
| **11** | Additional information, if any |  |
|  | Additional information if any. |  |

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Name and Signature

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_