

GI FORM 3

reg. 12(1)

THE GEOGRAPHICAL INDICATIONS ACT, 2013

**REQUEST TO AMEND/ WITHDRAW APPLICATION FOR
REGISTRATION OF A GEOGRAPHICAL INDICATION**

To:
The Registrar of Geographical
Indications
Uganda Registration Services
Bureau
Kampala

For Official Use:
Date of Receipt:
APPLICATION NO.:

Fees Receipt Number:
Amount:

(Office Stamp)

Applicant's or Agent's File Reference

IN THE MATTER OF:

Geographical Indication No .:..... in the names of
.....(insert name and
address of applicant/owner)

I/We, the applicants identified above, request to:

Amend my/our Application

Withdraw my/our Application

GROUND IN SUPPORT OF APPLICATION:

The grounds for amending/withdrawing the application are as follows:

.....
.....
.....
.....

Signature:

Name of signatory:

Date: