

FORM No. 1A

INDUSTRIAL DESIGNS ACT 2001

APPLICATION FOR REGISTRATION OF A DESIGN

MULTIPLE APPLICATION

Reference No. of Applicant
or Authorised Agent.....

To: The Controller of Patents, Designs and Trade Marks,
Patents Office,
Government Buildings,
Hebron Road,
Kilkenny.

The Applicant(s) named herein hereby claim(s) to be the proprietor(s) of the designs, representations of which are attached, and requests the registration of the designs on the basis of the following information:

1. Type of Application

This is a multiple application covering designs.

2. Fees

Included with this application is the prescribed fee of €
(or evidence of payment thereof) which comprises an application fee of €70 and an additional fee of €25 for each design included in the application.

3. Representations

Separate representations of each of the designs, complying with the conditions set out in Regulation 11, are enclosed.

Yes

No

[IMPORTANT – PLEASE NOTE: THE REPRESENTATIONS ENCLOSED WITH THIS APPLICATION MUST BE NUMBERED CONSECUTIVELY USING ARABIC NUMERALS INSERTED ON THE BACK OR REVERSE SIDE OF THE REPRESENTATIONS. THESE NUMERALS ARE REQUIRED TO IDENTIFY AND DISTINGUISH THE DESIGNS IN RESPECT OF WHICH REGISTRATION IS REQUESTED. WHERE MORE THAN ONE REPRESENTATION OF A PARTICULAR DESIGN IS SUBMITTED, EACH OF THE REPRESENTATIONS OF THAT DESIGN SHOULD BE ASSIGNED THE SAME IDENTIFICATION NUMERAL.]

4. Applicant(s)

Full name(s):

Address(es):

Nationality(ies):

5. Author(s)

If the author(s) is/are not the first proprietor(s) of the designs, insert here the Design Identification Numeral(s) and the name(s) and address(es) of the author(s). If there is more than one author indicate the design identification numeral of each design (see 3 above) opposite the name of each author.

<i>Design Identification Numeral</i>	<i>Name of author(s)</i>	<i>Address(es)</i>

6. Brief description of designs

Insert here a brief description of the designs. If you need to provide separate descriptions of each of the designs included in the application, indicate the design identification numeral of each design opposite each of the descriptions provided.

Design Identification Numeral	Description

7. Product(s)

List here the product(s) to or in which the designs are to be applied or incorporated. If the different designs included in the application are to be applied to or incorporated in different products, indicate the design identification numeral of each design opposite each of the products listed.

Design Identification Numeral	Product

8. Class(es)

List here the class(es) including the subclass(es) of the Locarno system of International Classification in which registration of the design(s) is/are requested.

[Note: Except in cases of ornamentation, all of the designs in a multiple application for registration must be in respect of products that belong to the same class of the Locarno system of International Classification.]

Design Identification Numeral	Class	Sub-class

9. Claim for right of Priority

Complete this section where a right of priority is claimed on the basis of an earlier application for registration of the design(s) that was filed in a state, country, territory or area within the meaning of section 26 of the Industrial Designs Act 2001 ("the Principal Act"). If there are different claims to priority in respect of the different designs included in the application, indicate the design identification numeral of each design opposite each of the claims listed.

Design Identification Numeral	State/Country/Territory/Area	Filing Date	File No. <i>(if available)</i>

10. Deferment of Publication

Is deferment of publication as provided for in section 32(2) of the Principal Act requested?

Yes

No

If yes, please indicate the period for which deferment is requested (the maximum period allowed is 30 months from the filing date or, if priority is claimed, from the date of priority).

Design Identification Numeral	Period of Deferment

11. Authorised Agent (if any)

The following has been authorised to act on behalf of the Applicant(s) in all proceedings connected with this application for registration:

Name of Agent:

Address:

12. Address for Service (indicate and complete as appropriate)

Same as at 11.

If not the same as at 11, state hereunder the address for service.

13. Signature

(The application may be signed by a person authorised to do so by or on behalf of the Applicant(s) or by the Agent named at 11).

Date: