

- General Authorisation
 Individual Authorisation

For OHIM
ID No. for authorisation

Representative's reference No. _____

I / We

Name/s

ID No. of authorisor/s

Address

Street and house number
or equivalent
City and postal code
Country
Telephone number/s
Telefax number/s

do hereby authorise

Nature of
Representative

Professional representative

No. on the list of professional
Representatives

Nº 10675

Legal practitioner

Association of representatives

Employee

**SUGRAÑES PATENTES Y MARCAS
(Association of representatives No. 10675)**

Name of representative or
Association of representatives

Address (place of business)
Street and house number or
equivalent
City and postal code
Country
Telephone number/s
Telefax number/s

calle Provenza, 304
08008 BARCELONA
Spain
+34932151917
+34932153723

**To represent me/us before the Office for Harmonization in the
Internal Market (Trade Marks and Designs)**

General authorisation

in all proceedings as applicant or proprietor in relation to all present or future Community trade mark applications or registrations, as well as in all other proceedings before the Office

Individual authorisation

in the following proceedings

Sub-authorisation

may be given

may not be given

Signature/s

Place and date

Signature

sign here +

5

Name of person/s signing