**GEOGRAPHICAL INDICATIONS ACT 2014**

**GEOGRAPHICAL INDICATIONS RULES 2019**

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| **CS10** | **CONTINUATION SHEET 10** | | | | | |
| *Notes:*  *\* denotes mandatory fields.* | | | | | | |
| **PART 1** | | | | | | |
| **Continuation Sheet to** | Part | | | | of Form GI |  |
| **PART 2** | **Details of Applicant / Subsequent Registrant (Transferee)** | | | | | |
| **UEN / Company Code**  *(if available)* | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  | | | | | | |
| **Name\*** |  | | | | | |
| **Address\*** | Singapore address | | | | | |
| *(Please provide either a Singapore address or an foreign address)* |  | | This Singapore address is to be used as the address for service for the purposes of all proceedings in respect of the application for registration *(applicable to Form GI1 only)* | | | |
|  | | This Singapore address is to be used as the address for service for the purpose of the application in Form CM8 and will be effective for all matters in respect of the geographical indication(s) after the transfer *(applicable to Form CM8 only)* | | | |
| Block / House No. | | | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | | | |
| Street Name | | |  | | |
| Level - Unit No. | | | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | - |  |  |  |  |  |  | | | |
| Building Name | | |  | | |
| Postal Code | | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | | | |
| Foreign address | | | | | |
| Line 1 |  | | | | |
| Line 2 |  | | | | |
| Line 3 |  | | | | |
| **Capacity to file\*** | The applicant / subsequent registrant (transferee) is:  Choose an item. | | | | | |
| *(Please fill in the relevant fields under “Legal entity” or “Individual”)*  Legal entity | | | | | | |
| **Country/Region of incorporation\*** |  | | | | | |
| **State of incorporation**  *(mandatory for US corporations)* |  | | | | | |
| **Sole proprietor’s or partners’ name(s)**  *(if sole proprietorship or partnership)* |  | | | | | |
| Individual |  | | | | | |
| **Nationality\*** |  | | | | | |
| **Country/Region of residency\*** |  | | | | | |