

Trademark Applicant Information
If the trademark is to be owned by an individual please complete the following portion:
Full Name of Applicant:
Company Name:
If the trademark is to be owned by a company, please complete the following portion:
Company Name:
Corporate Form:
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Trust <input type="checkbox"/> Estate <input type="checkbox"/> Other
State of Incorporation or Organization:
Name of Officer Signing Application:
Title of Officer Signing Application:
Contact Information:
Address:
Phone:
Phone 2:
Facsimile:
Email:
Mark Information:
<p>(A) Describe your mark here: <i>(Note: if your mark includes Logo or Stylized Lettering, please send us copy of the mark to our office)</i></p>
<p>(B) What do you consider the important features of the mark?</p> <p> <input type="checkbox"/> I will provide the mark later <input type="checkbox"/> Word(s) <input type="checkbox"/> Picture, logo, design, or emblem <input type="checkbox"/> Combination </p>

<p>(C) Please provide a complete list of the particular types of goods or services with which the mark is being / will be used? (e.g., Restaurant, Food, Clothing, Hair Care Product, Lawn Care Service, etc.)</p>
<p>(D) Is the mark currently being used in interstate commerce? (i.e., within a single state)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>(E) If yes, what is the approximate date (month/year) that the goods/services were first sold/performed anywhere?</p>
<p>(F) If applicable, what was the approximate date (month/year) that the goods/services were first sold/performed either between states or between the U.S. and another country (i.e., Interstate Commerce)?</p>
<p>(G) Has a trademark application been filed outside of the United States?</p> <p style="padding-left: 40px;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 40px;">If yes, please provide the following:</p> <ol style="list-style-type: none"> A digital or paper copy of the application and/or Registration Certificate; A complete English translation of the certificate (signed by translator); The Renewal Date (i.e., date was last renewed): _____ The Expiration Date of the Registration: _____
<p>(F) If the mark is currently being used, please forward a specimen (or a digital photograph of a specimen) of the mark applied to the goods/services (e.g., packaging, labels applied to the goods, tags applied to the goods, an advertisement of services, etc.)</p> <p style="padding-left: 40px;"><input type="checkbox"/> <i>I will provided this later</i></p>
<p>(H) If the mark includes stylized lettering and/or a logo, please provide a digital (.jpg) file of the mark, if available. Alternatively, please provide a paper copy from which our illustrator can create an appropriate digital (.jpg) file.</p> <p style="padding-left: 40px;"><input type="checkbox"/> <i>I will provided this later</i></p>
<p>(G) Any additional comments:</p>