

Name of person/s signing

	General Authorisation Individual Authorisation
For OHIM ID No. of 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 Legal practitioner Association of representatives Employee
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	
	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
Individual authorisation	Office in the following proceedings
Sub-authorisation	may be given may not be given
Signature/s Place and date	