Form XIX

 (Regulation 19)

(To be completed in duplicate)

Notice No. …



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Protection of Traditional Knowledge, Genetic Resources**

**and Expressions of Folklore Act**

**(Act No. 16 of 2016)**

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**The Protection of Traditional Knowledge, Genetic Resources and**

**Expressions of Folklore Regulations, 2021**

**REQUEST FOR INFORMATION**

**TO:** **THE REGISTRAR**

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| **DETAILS OF APPLICANT** |
| Full names (1)……………………………………………………….……….……………………..Identity Number....................................................................................................Nationality…….......................................................................................................Residential address…………....................................................................................Telephone Number……………………………………….……………………………………….. Mobile number………………………………………..…………………………………………….Email address…………………………………….………………………………………………… |
| 1. Here insert name of holder/representative\*
2. Here specify whether holder/representative\*
3. Here specify name of register
 | I/we\*(1) ……………………………………………………………………………………………………….…………………………………………………………………………………………………………………..in my/our\* capacity as (2) ……………………………………………………………….. give notice of the changes) in the particulars entered in the Register (3) …………………………………..…………………………………………………………………………………………………………………..…………………………………………………………………… register\* as follows: ……………………………….…………………………………………………………………………………………………………………………………………………………..……………………………………….………………………………………………………………………..………………………………………………………………………………………………………………..………………………………………………………………………………………………………………..………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………. |
|  | Dated this ……………… day of ……….………………… 20…….\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Holder/Representative\* |
| **FOR OFFICIAL USE ONLY**Received by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Officer’s name and signature**OFFICIAL STAMP**Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |