

To be completed by the Hungarian Patent Office

ID number:

I received the order on behalf of the Hungarian Patent Office.

Budapest, day monthyear

administrator

ORDER FORM

Simplified trademark filtering

1. Data of customer:

Name/Company name (invoicing name):*

Address/Seat (invoicing address):*

Notification address (if different from Address/Seat):.....

Phone:* Fax: E-mail:

2.* Simplified trademark filtering is requested

for the following sequence of characters:

.....

.....

for the attached figurative mark or mark combined with a figure, in the following classes of goods and services of the Nice Classification:**

.....

3.* The search list

should be transmitted by mail.

will be taken over personally at the Customer Service of the Hungarian Patent Office.

Printing in full and making available of documents cited in the search list of the simplified trademark filtering can be requested at the Customer Service of the Hungarian Patent Office against the payment of a fee.

4. Please send the search list also

by fax (up to 10 pages at most).

by e-mail.

5. Enclosures: pcs.

6. Method of payment:

in cash on the spot by bank card on the spot by bank transfer by postal cash-transfer order

I hereby declare that I have read the [General Terms and Conditions](#) governing the furnishing of the present service of the Hungarian Patent Office and the relevant [price list](#) and I accept them as binding.

Done in, day monthyear

.....
(authorised) signature of customer

* Lines and items marked by an * are mandatory.

** [Class\(es\) of goods and services according to the Nice Classification](#) must be indicated in numbers. For lack of indication of classes, trademark search will be performed in all classes (45) of the Nice Classification and the relevant fee will be charged.