

**FORM 1**

**AUTHORISATION OF AGENT  
TRADE MARKS ACT  
(REGULATION 16)**

I/We .....

of .....

Have appointed Messrs. **ETUK & URUA** of 10, Adelabu Street, Lagos, Nigeria to act as my/our agents for the registration/renewal/assignment of Trade Mark (s)

.....

.....  
and request that all notices, requisitions and communication, if any, in respect of the same matter or proceeding may be sent to our above mentioned agents at the above address.

I/We hereby declare that I am/We a/are .....

**Dated this ..... day of .....2004**

(Signed): .....

**Secretary/Director/Manager**

Address.....

.....

**To:**

**The Registrar of Trade Marks  
Commercial Law Section  
Trade Marks Department  
Federal Ministry of Commerce  
Garki,  
Abuja.**