



**FORM 1**  
**AUTHORISATION OF AGENT OF THE TRADE MARKS**  
**ACT 1965**

I/We .....

Of .....

Have appointed ESANGBEDO PIUS & CO. 10 Onayade Street Yaba, Nigeria to act as my/our agents for the registration of Trade Marks

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.....

.....

and request that all requisitions and communication relating thereto may be sent to such agent at the above address.

I/We revoke all previous authorisations, if any, in respect of the same matter or proceeding.

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

.....

.....

DATED this ..... day of .....

Signed .....

*Secretary/Director/Manager*

Address.....

The Registrar of Trade Marks,  
Federal Ministry of Commerce,  
Trade Marks Section,  
Garki, ABUJA