

GI FORM 14

reg. 30 (2)

**GEOGRAPHICAL INDICATIONS ACT, 2013
APPLICATION FOR REVIEW DECISION BY REGISTRAR**

<p>To: The Registrar of Geographical Indications Uganda Registration Services Bureau Kampala</p>	<p>For Official Use: Date of Receipt: APPLICATION NO.: (Office Stamp) Fees Receipt Number: Amount:</p>
<p>Applicant's or Agent's File Reference</p>	
<p>IN THE MATTER OF: An application to review the registrar's decision in respect of a geographical indication application/ registration number:</p> <p>I. Full name and address of person applying for review of the decision of the registrar:</p> <p>Nationality: Country of Residence or Principal place of business: Tel No: Email Address:</p> <p>II. Full name and address of agent (if any)</p> <p>III. GROUNDS OF REVIEW: The grounds for review of the registrar's decisions are as follows: (Supporting statement to accompany this Form)</p> <p>Signature:</p> <p>Name of Signatory:</p> <p>Date:</p>	