

Section 1: Personal Information

Request to Surrender a Licence Application Form

Instructions:

Please complete this form in its entirety and submit it to the College of Patent Agents and Trademark Agents (CPATA) via email, along with all required supporting documentation, to the attention of the Director of Registration at dirregistration@cpata-cabamc.ca. Details of the application process and required documentation can be found at: https://cpata-cabamc.ca/agents-trainees/licensure/

Current Legal Name							
First Name:	Middle	e Name:	Last Name:				
CPATA #:	Patent Agent I	Licence #:	Trademark Agent Licence #:				
Section 2: Licence Type Please select all that apply: I am applying to surrender my Patent Agent Licence.							
I am applying to surrender my Trademark Agent Licence.							
Section 3: Current Contact Information <u>Business Address</u>							
Company Name:							
Address:			Unit/Suite:				
City:	Province:	Country:	Postal Code:				
Business Email Address:	Business Phone:		Extension:				



Home Address

Unit/Suite: Address: City: Province: Country: Postal Code: Personal Email Address: Preferred Phone: Section 4: Future Contact Information (if applicable) Future Address Company Name: Unit/Suite: Address: City: Province: Country: Postal Code: Business Email Address: Business Phone: Extension: Home Address Same as Current Unit/Suite: Address: City: Province: Country: Postal Code: Personal Email Address: Preferred Phone:



Section 5: Professional Employment History

Employer Name	Job Title	Start Date	End Date

Section 6: Declarations

I confirm:

All client matters have been completed or that arrangements have been made to the satisfaction of my clients to have their files returned to them or transferred to another Class 1 Licensee.

Any matters in progress at the Patent Office or the Office of the Registrar of Trademarks have been assigned to another Class 1 Licensee and the appropriate office has been advised of this in writing of the successor licensee.

I am not the subject of a complaint or an investigation under section 37 (Investigation) of the College of Patent Agents and Trademark Agents Act.

I understand that as of the date my licence is deemed surrendered by the Registrar that I am not entitled to represent persons in the presentation and prosecution of applications for the registration of patents or trademarks, or in other business before the Patent Office or Office of the Registrar of Trademarks, as applicable.

I acknowledge:

On the effective date of my license surrender, I will cease to be a licensee of the College and am no longer a Patent Agent and/or a Trademark Agent and may not hold myself out as such. Breach of this may result in a prosecution under the College of Patent Agents and Trademark Agents Act.



The College will post a notice on its website of my surrender of my licence.

The files from my practice can be found at this location:						
Address:			Unit/Suite:			
City:	Province/: State	Country:	Postal/Zip Code:			
Section 7: Fees The fee to apply to the Registrar to surrender a licence is \$250 plus applicable taxes. Please complete the payment authorization at the end of the form.						
Section 8: Signature						
The signature can be provided in ink or by inserting a secure electronic signature into the space below.						
Signature			Date			
Any information with respect to this application will be collected, used or disclosed in accordance with the CPATA's Privacy Statement.						



Payment Authorization:

Amount: \$250 + applicable taxes (List of tax rates is below).

Credit Card: Type: Visa Mastercard AMEX

Card #:

Card Validation Code (CVC): Expiry Date:

Name on Card:

Signature of Cardholder:

Authorized Amount \$ (including tax):

Once processed this information will be deleted by CPATA

<u>Electronic Funds Transfer:</u> Please email payments to: <u>payments@cpata-cabamc.ca</u> and provide

your name and "Request to Surrender Licence" in the comments box.

Tax Rates:

Please select the tax rate based on the province associated with your business address. If you do not have a business address, please select the tax rate associated with your residential address.

Province	Tax Rate (%)	Province	Tax Rate (%)
British Columbia	0.05	Nova Scotia	0.15
New Brunswick	0.15	Nunavut	0.05
Manitoba	0.05	Ontario	0.13
Alberta	0.05	Quebec (HST ONLY)	0.05
Newfoundland and Labrador	0.15	Saskatchewan	0.05
Prince Edward Island	0.15	Yukon	0.05
Northwest Territories	0.05		