

FIRST SCHEDULE

**BRUNEI DARUSSALAM
EMERGENCY (INDUSTRIAL DESIGNS) ORDER, 1999
INDUSTRIAL DESIGNS RULES, 2000**

**The Registrar of Industrial Designs
Registry of Industrial Designs**

Designs Form D11

For Official Use	
Date of receipt	Amount: \$ * Cash/Cheque/Money Order No: <i>(* delete whichever is inapplicable)</i>

Application for Extension of Time
rule 69
(To be filed in duplicate/triplicate, see note 4)

(see the notes on the last page of this form)

01 Your reference				
02 Application/Multiple Application/Registration No. <i>(delete as appropriate) (see note 3)</i>	<p align="center">For Official Use</p> <p>To: Applicant/Agent</p> <p align="center"><u>CONFIRMATION OF GRANT OF EXTENSION</u></p> <p>Extension of time granted up to:</p> <p>_____</p> <p>for Registrar of Designs</p> <p>Date: / / <i>(day/month/year)</i></p> <p>Encl.: Receipt attached <input type="checkbox"/></p> <p>c.c.:</p>			
03 I request an extension of time to file the following documents/to take the following action:				
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 20%;">Rule No.</th> <th>Document to be filed/ action to be taken</th> </tr> </thead> <tbody> <tr> <td style="height: 150px;"> </td> <td> </td> </tr> </tbody> </table>		Rule No.	Document to be filed/ action to be taken	
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<p>04 Reasons for the delay</p>	
<p>05 Details of the person(s) making the request</p> <p>Full name(s) (<i>underline surname</i>)</p> <p>Address</p>	
<p>06 Name of agent (<i>if you have one</i>)</p> <p>Address for service</p> <p>Telephone</p> <p>Fax</p> <p>Tick the box if the address above is to replace the address for service on record (<i>see note 5</i>)</p>	<input data-bbox="858 1070 917 1131" type="checkbox"/>
<p>07 Declaration (<i>tick if applicable</i>)</p> <p><input data-bbox="240 1263 300 1323" type="checkbox"/> I/We declare that I/we have given notice of this request to every other person who is a party to these proceedings (this declaration is to be made in inter-partes proceedings)</p>	
<p>08 Name of signatory</p> <p>Official capacity of signatory</p> <p>Date: / / (<i>Day/month/year</i>)</p>	<p style="text-align: center;">_____ Signature</p>

Notes:

1. *Please complete this form in black ink or by typing.*
2. *This form when completed, should be brought or sent to the Registry of Industrial Designs together with the prescribed fee.*
3. *A separate form should be used for each application.*
4. *In the case of extension of time for inter-partes proceedings, this form should be filed in triplicate.*
5. *If you have ticked the box, you do not need to file Designs Form D13. The address for service must be an address in Brunei Darussalam.*
6. *If there is not enough space for all the relevant details on any part of this form, please continue on a separate sheet and write “see continuation sheet” in the relevant part. Any continuation sheet should be attached to this form.*
7. *This form must be signed and dated by the applicant or his agent.*