

CONFIDENTIAL

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MAINE PATENT PROGRAM
Request for Initial TRADEMARK Counseling / New Client Record

Name: _____ Position/Title: _____
Business Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
County: _____
Phone: _____ Fax: _____
E-mail address: _____
Business organization: __ Sole Proprietorship __ S Corp
 __ Partnership __ LLC
 __ Corporation __ Undecided

State of incorporation: _____
If individual, check here if you are a U.S. citizen: _____

Type or clearly print your trademark (words only, no design):

Attach a version of your trademark with design features (if any):

Describe the goods or service on which your trademark is (will be) used:

Are you currently using the trademark? Yes ___ No ___
If yes, provide the date you first used your trademark in commerce: _____

Please explain the specific assistance you would like to receive from our program (attach additional pages as required):

Agreement:

I am requesting intellectual property counseling and information from the Maine Patent Program ("Program"). I understand that initial trademark screening and assistance preparing a basic trademark application may be provided by the Program, and that these services are at no cost to me. I understand that the screening search performed by the Program is an initial search only and does not guarantee availability of my trademark. I have been advised and am aware that a full search is recommended. I also understand that the Program may use the information provided in this form on a limited basis to notify me of workshops, seminars, and other matters that may be of interest to me. I further acknowledge and understand that persons employed by the Maine Patent Program and the Center for Law and Innovation are public employees, working for the State on behalf of the University of Maine System, and that they do not carry professional malpractice insurance.

Signature of Applicant

Date

Printed Name of Applicant

RETURN TO:
MAINE PATENT PROGRAM, 246 Deering Avenue, SUITE 115, PORTLAND, MAINE 04102
Email: patent@usm.maine.edu Fax: (207) 228-8431