

General power of attorney

This form is a notification of an appointment or change of representative.

Fields marked ▶ must be filled in

Fields marked * fill in if relevant

Fill in with *typed* or *capital* letters.

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onsagers

▶ Subject area Trademark Design Patent All

Change of representative

This is a notification of change of representative.

Representative

I/we hereby authorize:

Name:
Onsagers AS

Address

Postal code

City

Country

Organisation number

Customer ID:

1075

the power to file an application and represent me/us in everything concerning it, and after the application has been registered, to receive announcements and other procedural communications relating to it. I/we hereby also confer upon the representative the right to withdraw the application, partially or totally, and to request a partial or total cancellation of the protection. This power of attorney includes divisional and separate applications and protection obtained on the basis of such applications. The representative is authorised to transfer this power of attorney to another agent.

Applicant/holder

Name / Company name:
Interwell Norway AS

Address:
Postboks 916

Postal code:
N-4089

City:
Hafslund

Country:

Organisation number:

Customer ID:

Signature

Place and date

Signature (the holder or his/her representative):

Trondheim 25.03.19

Anders Røed

ADRESSE

Postboks 8160 Dep.
Københavnsgaten 10
0033 Oslo

TELEFON

22 38 73 00

TELEFAKS

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Form

This form is a notification of a general power of attorney. A general power of attorney is an assignment of all existing and future rights of the applicant/holder to the representative. Each application thereafter must include a copy of the original authorization.

▶ **Subject area**

Indicate whether the appointment concerns a trademark, design or patent, if it concerns two of the subject areas or all of the subject areas.

* **Change of representative**

Check box if the notification is a change of representative. Change of representative must be submitted on separate forms. These are downloadable at www.patentstyret.no and must be submitted before sending in this form.

▶ **Representative**

Name and address of the representative must be stated. Please include customer ID, if you are a customer at the Norwegian Patent Office. It is also possible to submit the logo of the representative's office.

* **Division and separation of basic application**

The power of attorney is applicable to possible divisional and separated applications. Such applications must each contain a reference to the power of attorney in the basic application.

▶ **Applicant/holder**

The name and address of the holder must be stated. Please include any customer ID at the Norwegian Patent Office.

▶ **Signature**

The form must be signed by the applicant/holder. Copies of the form will be accepted only if all the submitted information is legible. For trademarks, only the original copy is sufficient. If the notification concerns a transfer of power of attorney, the signature of the current representative is sufficient. If a trademark, design or patent has more than one applicant/holder, all must confirm the appointment of the representative. Separate authorizations must be submitted if the applicants/holders have different addresses.

