

Application for Recordal of Insignia or Renewal/Reactivation of Recordal Under the Fastener Quality Act

15 U.S.C. § 5401 *et seq.*

15 C.F.R. § 280.300 *et seq.*

**Application For Recordal Of Insignia Under The Fastener Quality Act or
Renewal/Reactivation of Recordal**

15 U.S.C § 5401 *et. seq.* (15 C.F.R. §280.300 *et. seq.*)

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To request recordal:

1. Complete sections 1 through 4 of USPTO Form 1611.
2. Sign and date the form.
3. Attach a copy of your trademark registration certificate or application drawing page, as appropriate.
4. Attach a check or money order in U.S. currency or a completed credit card authorization form, or include a USPTO Deposit Account number for required fees.
5. Submit the form either by mail, by fax, or by email.

To request renewal:

1. Complete sections 1, 2, 3 and 5 of USPTO Form 1611.
2. Sign and date the form.
3. Attach a copy of the certificate of recordal.
4. Attach a check or money order in U.S. currency or a completed credit card authorization form, or include a USPTO Deposit Account number for required fees.
5. Submit the form either by mail, by fax or by email.

To request reactivation:

1. Complete sections 1, 2, 3 and 6 of USPTO Form 1611.
2. Sign and date the form.
3. Attach a copy of the certificate of recordal.
4. Attach a check or money order in U.S. currency or a completed credit card authorization form, or include a USPTO Deposit Account number for required fees.
5. Submit the form either by mail, fax, or by email.

To submit the form via mail, please send form, required attachments and method of payment to the address below.

Director, USPTO
ATTN: FQA
600 Dulany Street
MDE 10-A71
Alexandria VA 22314-5793

To submit the form via fax, please transmit form, required attachments and method of payment to 571.273.8950.

To submit the form via email, please attach completed form, scanned versions of required attachments, and method of payment to an email, indicate "ATTN: FQA" in the subject field, and transmit to tmfqa@uspto.gov.

The credit card authorization form and instructions are available at www.uspto.gov/web/forms/2038.pdf.

The fee for recordal, renewal and reactivation is currently \$20 per application. Fees are subject to change. If renewal is requested within six months following the expiration of the certificate of recordal, a \$20 surcharge is required. For more information see www.uspto.gov/web/offices/ac/qs/ope/fees.htm for current USPTO fee schedule.

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6 Request for Reactivation

When a previously recorded alphanumeric designation is assigned to another entity the recordal becomes “inactive” as of the date of the assignment. The new owner of the alphanumeric designation must “reactivate” the designation by filing a new application and requesting reactivation. The assignment documents must also be submitted with the application. Note: Only one recorded alphanumeric designation may be reactivated per application. Where a Certificate of Recordal is based on a trademark application or registration and the underlying application or registration has been assigned, the recordal shall be designated “inactive,” and CANNOT be reactivated. See 15 C.F.R. §280.323(b). The new trademark owner must apply for a new recordal.

The applicant request reactivation of the recorded Alphanumeric Designation listed below. **A copy of the assignment documents are attached.**

ALPHANUMERIC DESIGNATION

7 Verification

The applicant identified below is a manufacturer as defined in 15 U.S.C. §5401. The applicant will comply with the applicable provisions of the Fastener Quality Act (15 U.S.C. §§5401 *et seq.*). The undersigned has knowledge of the facts relevant to the application and possesses the authority to act on behalf of the applicant. The undersigned declares, under penalty of perjury under the laws of the United States of America, that the information and statements included in this application are true and correct.

The prescribed fee must accompany this application. You have three options to submit this form.

1. You may sign this form electronically by typing the applicant’s name in between forward slashes (example: / John Smith /) and click the submit button to email your information to tmfqa@uspto.gov, if you are paying the prescribed fee with a line for deposit account with the USPTO. Please email us any attachments.
2. You may print, manually sign, and fax this form to 571.273.8950 or print, manually sign, scan, and email all documents to tmfqa@uspto.gov, if you are paying the prescribed fee from a deposit account with the USPTO. You may also fax or email a completed credit card authorization form located at www.uspto.gov/web/forms/2038.pdf.
3. You must print, manually sign, and mail this form if you are paying by check. Please mail the check with this form. Keep a copy for your records.

APPLICANT’S SIGNATURE

PRINT OR TYPE NAME AND POSITION OR TITLE OF SIGNER

DATE

DEPOSIT ACCOUNT INFORMATION (IF APPLICABLE)

Applicant