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| FILING OFFICE STAMP |

**APPLICATION WITHDRAWAL FORM**

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| ***Applicant’s details*** | First name  | Surname | Surname at birth |
|  |
| ***Mailing address:*** | Street | House No. | City district |
|  | Municipality/Town/City | Postcode | Country |
| ***Attorney-in-fact\**** | First name\* | Surname\* |
| ***Mailing address*** | Street\* | House No.\* | City district\* |
|  | Municipality/Town/City\*  | Postcode\* | Country\* |
| **Application** | dated       |
| ***Grounds for withdrawing the application*** |
| Date | Signature |