Please use **black or blue ink** and print within the boxes in **BLOCK LETTERS.**
Please leave spaces between words. Use crosses in boxes marked with an X

Application to Hold Mail

*221 13596522 2

Please note: In the period of the mail holding service, you will not be able to access mail held by Australia Post. Mail articles are not kept at Post Offices, and you are not able to collect mail from the delivery centres. All mail held by Australia Post will be delivered to your address when your normal mail delivery resumes (on the first delivery date after the finish date of this application).

Are you holding mail for (cross both if applicable)

private individuals ☐ **business / organisation** ☐ ABN

1. Start date of your Mail Hold service - allow **three full working days** (Mon to Fri) **after lodgement** for the service to start D D M M Y Y Y Y

Finish date Mail received **on** these dates will **also** be held by Australia Post D D M M Y Y Y Y

2. Mailing address

Suburb State Postcode

3. Full name of **each person** or business / organisation covered by this application

Title (Mr, Mrs etc) Business / surname (include maiden name, if applicable) Given names (in full)

4. ☐ As part of your Mail Hold service, we may send you information from Australia Post and other organisations via mail on products and services - including offers and discounts. Cross the box if you **do not** want to receive this information.

☐ I would like to receive the aforementioned information on products and services via SMS.

5. Details of the person lodging this form

Title (Mr, Mrs etc) Surname (include maiden name, if applicable) Given names (in full)

By giving us your email address, we can provide information about products and services from Australia Post and other organisations via email.

E-mail address

Area code Daytime phone

Area code After hours phone

Mobile phone

6. Declaration by the person lodging this form - I have **authority** to include the people listed above. I understand it is a **criminal offence** to have a person's mail held without their authority or to give Australia Post false or misleading information. I have read and understood the **terms and conditions**.

Signature

Date D D M M Y Y Y Y

CRN: 135965222

Office use only

Checklist

- ☒ Q1 Allow **3 full working days** Selected private / business or both
- ☐ Q2 Address legible
- ☐ Q3 Complete and legible
- ☐ Q4 If not crossed confirm
- ☐ Q5 Name legible, at least one phone number
- ☐ Q6 Signed and dated

ID to include name, address and signatory of person lodging form

☐ **Photo ID**

ID type:

ID no:

OR 2 forms of document ID

☐ ID type:

ID no:

ID type:

ID no:

If applicable, document sighted

☒ Pension card ☒ Written authority

☒ Stat dec ☒ Business reg docs

Charge category

- ☐ Other
- ☐ Business
- ☐ Concession
- ☐ Staff
- ☐ Service delivery
- ☐ Box diversion
- ☐ Deceased estate
- ☐ Bankruptcy trustee

Amount Paid $

- ☐ Attach receipt to customer copy and attach copy of receipt to the **back** of the LH corner of this sheet (not on the barcode corner)
- ☐ Advise customer to keep copy/CRN

DATE STAMP

Accepting officer's name

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Signature

Date D D M M Y Y Y Y

Customer copy

Customer reference number

CRN: 135965222

Please keep this copy for your records and for any enquiries.

Customer enquiries

13 13 18 (within Australia)

or visit auspost.com.au/mail-redirect

Quote you customer reference number

Amount Paid $

DATE STAMP