PO/L2

			REQUIREMENTS Personal Use: 2 Current Photo IDs Business Use: 2 Current Photo IDs and the Business Licence.	
1. Name to which box number is assigned			2. Effective date of service	
3. Name of person applying, title (if representing an Organization) and name of Organization (if different from item			 4. Will this box be used for soliciting or doing business with the public (check one a. Yes b. No 	
 Address (number, street, village, city) when address changes, cross out address here and put new address on back 			6. Telephone Number	
 7. Signature of applicant (identify in item 3) I agree to comply with all postal rules regarding post office box service ► x 			8. Date application received	
 Enter two types of identification or ID nos-one must be photo bearing (Drivers license, Social Security, Passport) 	10. Date of Application		12. Box size needed	
	11. Check eligibility for Postman delivery		13. Identification and physical address verify by (Initials)	

PART 2

14. Postmaster: The following names, persons or representative of the organization listed below are authorized to accept mail address to this Post Office Box

a. Name of applicant (same as in item 3)b. Name of box customer (same as item 1)		<u>Customer Note</u> : The Postal Service may consider it valid evidence that a person is authorized to remove mail from the box if that person possesses a key to the box.
c. Other authorized representative	d. Other authorized representative	17. Postmaster General
e. Authorized User	f. Authorized User	
15. Box number to which this form applies		
16. Signature of applicant (same as item #1) applicable standard. I certify that the statements made by me are true and complete. I understand that anyone who furnishes false or misleading information on this form or omits material information requested on the form may be subject to criminal sanctions (including fines and imprisonment)		
►x		Date: