U.S. Postal Service

REQUEST TO PROVIDE MAIL RECEPTACLE

From: Post Office, State and ZIP+4 Code

In Reply Refer to

Advise correspondents to use your complete address *(include street identification, mobile home lot number, apartment number, office suite and ZIP+ 4 code)* on all mail *(forwarded or received)* addressed to or from you. These actions will reduce delays and misdeliveries.

PRIVATE RESIDENCE

Dear Customer:

Address _____

In order to eliminate delays, reduce misdeliveries and insure speedy delivery of the mail, it is required that each house or business have a visible street identification number and conveniently located mail receptacles that conform to Postal regulations and specifications. Your premises lack the essential requirements for carrier delivery as indicated below.

(✓)	Irregularities *(Checks are applicable to you)*
	No Mail Receptacle or Mailbox
	Malfunctioning, Inoperative Mail Receptacles
	No House Number
	No Door Slot *(door slot must be at least 1.50 inches wide, 7 inches in length and shall not be less than 30 inches from the bottom of the door. Consult your Postmaster for complete specifications).*
	Screen Door Locked *(if necessary to keep it locked, you must install an outside box).*
	Mail Receptacle in Bad Condition
	Hazardous to reach receptacle *(Specify)*
	Approaches to Mail Receptacle are not kept clear of snow, vehicles, and other obstacles/impediments.
	Mail Receptacle not Approved by Postal Service *(Rural Routes)*
	Receptacle Improperly Located
	Others *(Specify)*

(✓)	Corrective Action Necessary but not limited to the item(s) Checked
	Install U.S. Postal Service Approved Receptacle
	Relocate Mail Receptacle or Mailbox to a More Visible and More Accessible Location
	Keep access to mailbox free of impediment(s)
	Repair or Replace Malfunctioning Parts
	Other *(Specify)*

APARTMENTS AND MULTI-FAMILY HOUSING

Dear Owner/Manager:

The mail receptacles located at _____

_____

are in need of immediate repair. If new boxes are necessary, U.S. Postal Service approved boxes must be installed. So that there will be no questions as to disposition or treatment of mail, repairs must be made only when a representative of the Postal Service is present. It is unlawful for anyone other than Postal employees to open receptacles and expose mail.

(✓)	Irregularities *(Checks are applicable to you)*
	Apartments without Receptacles
	Tenants do not have keys
	Receptacles with doors missing, bent or damaged
	Receptacles with doors loose on hinge
	Receptacles Mount Loose in Wall
	Receptacles without Locks or Malfunctioning Locks
	Receptacles left Unlocked
	Receptacles Incorrectly or Insufficiently Mounted in Wall
	Because of Extensive Damage Subject Receptacles should or must be replaced at the management/owners expense.
	The Name(s) of all Occupants and the Corresponding Apartment Number Must be Legibly Listed in a Clearly Visible Position on Either or Both the Inside or Outside of the Receptacle(s)
	You Must Provide and Maintain Current Alphabetical Directory of all Persons Receiving Mail
	Others *(Specify)*

(✓)	Corrective Action Necessary but not limited to the item(s) Checked
	Locks to be Replaced or Reconditioned and Tenants Provided with Keys
	Repair or Replace any and all Defective Parts
	Replace or Install U.S. Postal Service Approved Receptacles
	List the Names, Complete Address *(include box number of all Occupants Served by Each Receptacle)* in a current directory
	Others *(Specify)*

Remarks

In order that the U.S. Postal Service may more expeditiously deliver your mail, your neighbors mail, avoid delivery problems and serve the general public more efficiently through the savings of carrier time, it is requested that you promptly correct the irregularities noted. Failure to correct the noted irregularities may necessitate the withdrawal of delivery service. The Postal Service does not desire to act arbitrarily in this matter; therefore, it is our request that you take immediate steps to provide acceptable facilities for delivery of your mail.

NOTE: If you have any questions or problems, please feel free to contact me at _____.

Postmaster/Authorized Representative Signature ▶

Date