## **DeliveryBox™ Application Form**

Please complete the form below and return to the following address;
National DeliveryBox™ Control Centre2B, An Post General Post Office, O'Connell Street Lower Dublin 1, D01 F5P2

Title: Mr Ms Other	
Name: Surname:	
DeliveryBox™ installation Postal Address: Please include company name if Business Application	٦.
Eircode:	
Home Phone No: Mobile:	
Email:	
Building Type: House Business Premises Other	
DECLARATION: I understand that DeliveryBox™ is the principal point of delivery for all mail addressed to installation postal address above for all recipients of mail at that postal address with the exception of exclusions outlined in points 8 and 9 of the Terms and Conditions. I confirm I have read and agree to the and conditions outlined and agree to complete a brief survey about my experience using DeliveryBox™.	the e terms
Signed: Date:	
Marketing Opt-In Wording:	
An Post would like to contact you with news and special offers from the An Post Group and select third as detailed in our Privacy Statement, available at anpost.com/privacy. You may withdraw your consentime by following the opting out procedure detailed in our Privacy Statement.  I consent to be contacted by SMS, Email and Phone  I do not consent to be contacted by Post	
Payment Details	
Please select your chosen method of payment:	
Cheque Postal Money Order Credit/Debit Card Post Office (Please attach	receipt)
Please enclose cheque or postal money order for the value of €69.99 with this form, if paying by this r Alternatively complete the credit card details below.	nethod.
I authorise An Post to take payment for DeliveryBox™ via the aforementioned payment method.	
Signed: Date:	
Cardholder's Name:	
Card Type: VISA  MasterCard	
Card No:	
Eircode:	

Note: Application subject to eligibility and availability - if we cannot complete your order, we will contact you and no payment will be taken. Once payment has been processed your DeliveryBox™ will be delivered within 5 working days.