



Singapore Post Limited
P.O. Box Section
10 Eunos Road 8
#05-37, Singapore Post Centre
Singapore 408600
Tel: 1605
Fax: (65) 6842 3776
(Reg. No. 199201623M)

MY MAIL BOX (BUSINESS) SERVICE APPLICATION FORM

SingPost Contact Person:

A. FOR CORPORATE APPLICATION (Applicant must be an Authorised Officer)

Company's Name (IN BLOCK LETTERS):	Registration Certificate No.#: <i>(Please attach copy of the latest Business Registration Certificate for verification)</i>	Authorised Officer's Name:
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Designation: <i>*(Dr/ Mr/ Miss/ Mrs/ Mdm/ Ms)</i>	Nationality:	Correspondence Contact No. Office: Mobile: Fax: Email:
	NRIC/ Passport No.:	

Company Address:

Singapore ()

Rate Table

Subscription Period	Fee for 1st Year	Renewal Fee for Subsequent Year
1 Year	S\$150	S\$150

Note: All charges stated herein are exclusive of Goods and Services Taxes ("GST") and are subject to prevailing GST.
Each My Mail Box subscription may be renewed up to a maximum of 2 years only

Please indicate if the local residential/company address to be linked to My Mail Box if different from Company Address

My Mail Box linked Local Residential/Company Address:
(if different from above)

Singapore ()

Please take note:

- 1) Applicants will get the My Mail Box Number within 5 (five) working days.
- 2) SingPost will mail the assigned My Mail Box number to successful applicants at the Applicant's local company address
- 3) All mail will be sent to the My Mail Box linked local residential address.

B. AGREEMENT BY CONTRACTING PARTY

- 1) We/ I hereby certify that the above particulars are true and correct.
- 2) We/ I have read the General Terms & Conditions and My Mail Box Terms & Conditions and agree to abide by them.
- 3) We/ I agree that upon acceptance of this order form, this document shall constitute a fully binding agreement between ourselves/ myself and SingPost.

Authorised Officer's Signature

Date

Company's Stamp
(If Applicable)

* Delete whichever is inapplicable.
To be produced for verification

FOR OFFICIAL USE

Processing and Approval of Application:

(a) Subscription Fee:	\$ _____
(b) Renewal Fee:	\$ _____
Total	\$ _____