

Appeal Form

- 1 Ensure to have your service ticket number as we need it to access your file and review what has been done about your complaint. Note: If you have not yet reported your complaint to Canada Post, we cannot review your appeal.
- 2 Please ensure that you attach supporting documentation (postage receipts, proof of value receipts, etc.) as incomplete appeals will not be processed.
- 3 We'll follow up with you within 5 to 10 business days to confirm the course of action in your case. If your appeal requires an investigation, you will have the ability to verify its status on our web site.
- 4 We'll investigate your issue within the scope of our mandate. We are independent of Canada Post and rely on a fact-based process to assess whether it reasonably applied its policies and procedures in the initial handling of your complaint.

First Name _____

Last Name _____

Name of business or organization, if applicable _____

Your Mailing Address

Canada Post Customer Service Ticket Number(s)

Please provide a phone number and/or email address where we can reach you for our follow-up communication and during the appeal process:

Phone (_____) _____ - _____

Email _____

Please indicate how you will provide copies of all documents in support of your appeal

- Attached Mail Fax Not applicable

SELECT THE GENERAL SUBJECT OF YOUR COMPLAINT

- Mail or parcel delivery issue or refund
- Hold Mail or Mail Forwarding
- Access to my mail and Canada Post services
- Quality of interaction with Canada Post staff
- Policies, specifications, and prices
- All other postal issues

If your appeal is about a mail or parcel delivery issue or refund, the following is required:

- I am the sender

Product purchased: _____

Tracking number(s): _____

Additional options purchased Signature Additional indemnity Coverage

Date item was mailed (dd/mm/yy): _____

If complaint is related to loss or damage, please list contents that were mailed

Value, if applicable: _____

What was the "TO" address on the item?

What was the "FROM" address on the item?

If your appeal is about Hold Mail or Mail Forwarding services, the following is required:

Hold Mail Mail Forwarding Service reference number: _____

What is the address the service was purchased for?

If Mail Forwarding, what is the address the mail is being forwarded to?

Start date of Service (dd/mm/yy): _____

End date of Service (dd/mm/yy): _____

If your appeal is about access to your mail or safety of the mail, please check the applicable box:

- Change in your mode of delivery
- Mail delivery method (i.e. mailbox at your door, community mailbox, rural mailbox)
- Safety issue accessing your mail
- Mail delivery suspension
- Your mail is delivered to another address / You are receiving some else's mail
- Ease of access to post office, customer service or website

If your appeal is about the quality of interaction with Canada Post staff, please check the applicable box:

- Delivery agent Post office counter clerk Call centre agent
- Online Other

All other postal issues, please check the applicable box and provide the reference number (if available):

- Money Order Cash on Delivery (COD) MoneyGram
- Other Issue Reference number: _____

Account of Events

Please summarize your complaint with Canada Post. If you need more space to explain, please attach extra pages to this form.

Please tell us what you think would be a fair decision in this case, and your expectations for the outcome of you appeal.

The information provided is accurate to the best of my knowledge.

Signature _____ **Date** _____