

Form to declare business closure day(s)

Business name	
Street	
Number	
Zip code	
Town	
Date	
Name	
Signature	

From now on, on the day(s) marked below, we are closed and we therefore <u>cannot</u> receive deliveries at the address above.

- Monday
- Tuesday
- □ Wednesday
- □ Thursday
- □ Friday
- □ Saturday

If you have made any changes to the hours of operation of your business, please tick the new closing day(s) above.

We are now open from Monday to Saturday and would like to receive deliveries.

□ Open every day

Simply hand this form, duly completed and signed, to your PostNL parcel deliverer or send it by e-mail to <u>csbe@postnl.be</u>

Kind regards, PostNL Pakketten