

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 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 indicate at least one phone number where you can be reached between 8:00 a.m. and 5:00 p.m.

Home (____) _____ - _____

Workplace (____) _____ - _____

Cell phone (____) _____ - _____

Email _____

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

- Attached
 Mail
 Fax
 Not applicable



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Product or service purchased, if applicable

Tracking number(s), if applicable

Options purchased at the time of mailing, if applicable (i.e. signature, insurance, etc.)

Location where the item was mailed, if applicable (i.e. post office address, mailbox location, etc.)

Contents, if applicable

Value, if applicable

Date of mailing (dd/mm/yy)

Destination address indicated on the item

Return Address indicated on the item

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

Signature _____ Date _____