№2 Station Square, Tbilisi, Georgia, 0100

Tel: (+995) 322 2 24 09 09; e-mail: info@gpost.ge

[www.gpost.ge](http://www.gpost.ge)

Preferred service center: ....................................................................................

Person responsible for accepting the application: ..........................................................

□ Not subject to payment

**Application on Requesting a Postal Item from the Archive**

**Applicant information**

**Name and surname** ----------------------------------------------------------------- **Tel:** ---------------------------------

 (mandatory field)

**Address** ------------------------------------------------------------------------- **e-mail** ---------------------------

 (Mandatory field. In case the postal item is not found, the notification will be sent to the address provided)

|  |
| --- |
| **Postal item information** |
| **Sender** ---------------------------------------------------------------------------------------------------------------------------------------Name and surname or an entity name/title (mandatory field)----------------------------------------------------------------------------------------------------------------------------------------Address (mandatory field) | **Addressee** ------------------------------------------------------------------------------------------------------------------------------ Name and surname or an entity name/title (mandatory field)------------------------------------------------------------------------------------------------------------------------------Address (mandatory field) |
| **Item identification number:**(to be filled out if registered postal items)№---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------- | **Estimated period for sending/receiving the postal Item:** ---------------------------------------------------------------Estimable period of sending (mandatory field)---------------------------------------------------------------Estimable period of receiving (mandatory field) |
| **Preferred service center for receiving the postal item requested from the archive**  ---------------------------------------------------------(not to be filled out if corporate client)**Address for sending the postal item requested from the archive**  ----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------(to be filled out if corporate client) |

***Other additional information:*** *----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------*

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 Applicant’s signature (mandatory field) Address (mandatory field)

**NOTE**: postal items can be requested from the archive by a duly authorized person: the item sender, addressee, a legal representative of a sender/addressee on the basis of a relevant written power of attorney and the person presenting the postal item (the person who delivered the postal item to Georgian Post for sending). Postal items can be requested from the archive presenting a relevant written application, a document verifying identity, and in case of a legal representative, on the basis of a relevant written power of attorney.