



ReplyPaid Application form

Please complete this form, fold and ReplyPaid to our Customer Care Centre.
Alternatively you can email it to fp.pp@nzpost.co.nz

Application details (please tick where applicable)

- This is an urgent application
- I wish to use a NZ Post approved response format.
- I have attached a copy of my design.
- I wish to apply for a ReplyPaid word (ReplyPaid Alpha)

ReplyPaid word requested (maximum 25 characters including spaces)

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NZ Post credit account number (8 digits):	
Company/organisation name:	
Physical address:	
Postal Code/Zip:	
ReplyPaid Postal Address (NZ Post PO Box or Private Bag)	
Postal Code/Zip:	
Contact name:	
Email address:	
Telephone:	Fax:
<input type="checkbox"/> I agree to comply with the terms and conditions outlined in the ReplyPaid brochure, NZ Post's Public Contract and Postal Users' Guide.	
Name:	
Signature:	Date:

NZ Post will collect and use the information set out in this form for the purpose for which it is provided. We will hold the information securely and will only use it in developing and running NZ Post and/or providing you information about products and services that we think might be of interest to you (including from our selected business partners). If you ask us not to provide you with this information, we will comply with your request. You may ask us to show you the personal information we hold about you and to make corrections to it.

NZ Post use

ReplyPaid authority number or word	
Initials	Date

FOLD

FOLD



Customer Care Centre
New Zealand Post Ltd
Private Bag 208038
Highbrook
Auckland 2161

FOLD

FOLD

Posting instructions

Complete all details on the ReplyPaid application form; then:

- If attachments are necessary, use another envelope and copy the address and ReplyPaid details from this form.
- Fold this end of the form towards the centre of the form.

No stamp is required when mailing.

If you have any questions regarding the completion of this form, please contact our Customer Care Centre on 0800 501 501.