

The Mauritius Post Ltd
Request for Redirection



MPL 198 (Rev July 2021)

Ref No.

1 Are you redirecting mail for (Tick as appropriate)

(a) Private / Individuals

(b) Corporate :- Company / Organisation/ Institution

2 Is redirection temporary or permanent?

Temporary <input style="width: 40px; height: 20px;" type="checkbox"/>	
Starting Date	/ /
Ending Date	/ /

Permanent <input style="width: 40px; height: 20px;" type="checkbox"/>	
Starting Date	/ /
Ending Date	/ /

It is advisable to inform correspondents of the change in address to avoid delay in delivery

3 Annual Redirection Fee:
(i) Individual Rs 200 (ii) Corporate Rs 750

4 Validity : 12 months as from date of application
(Renewable on expiry)

Old Address (in Block)	New Address (in Block)
Line 1: _____	Line 1: _____
Line 2: _____	Line 2: _____
Locality: _____ Postcode: _____	Locality: _____ Postcode: _____

6 Please write the name of your next neighbour or any landmark to facilitate identification of your new location.

7 Draw a sketch of the new location

8 Full name of each and every person covered by this application for Private and Individuals

1	Title (Mr, Mrs, Miss, Minor)	Surname (include maiden name, if applicable)	Other Name	Tick if age over 18	Signature if age over 18
1					
2					
3					
4					
5					
6					

9 Full Name of Company / organisation or institution

10 Declaration by the person lodging this form -

I hereby certify that I have authority to include the name/s mentioned at item 8 or 9, (whichever is applicable). I understand that it is a criminal offence to redirect the mail of a person, a business, an institution or an entity without authority and I also certify that the information given above is correct.

Mr, Mrs etc	Surname (include maiden name, if applicable)	Other name

Please state your position if request is made on behalf of company:

Email:	Tel: (Mob)	(Res)	(Office)

Application Date / /	Signature of Applicant	
NIC		

Company's /organisation's seal (if applicable)

For Office use only

11 Date of Payment

Amount Paid

Rs:

Receipt No.

Office Date stamp

12 To the Postmaster of for Authentication at Old Address

Authenticated at old address by:

Date / /	Name of Postman	Walk No.	Signature of Postman
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Date / /	Signature of Postmaster:		
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Office Date stamp Old Address

13 To the Postmaster for Authentication at New Address

YES NO

(a) Authenticated at new address

Provide reason if not authenticated:-

Date / /	Name of Postman	Walk No.	Signature of Postman
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Date / /	Signature of Postmaster:		
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Office Date stamp New Address

14 To the Postmaster.....for filing at Old Address

(a) Request approved Redirection Card prepared and handed over to Postman

I hereby acknowledge receipt of the Redirection Card

Date / /	Name of Postman	Walk No.	Signature of Postman
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(b) Request Rejected at New address

Action taken:-

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Date: _____ Signature of Postmaster:.....

Office Date stamp old Address