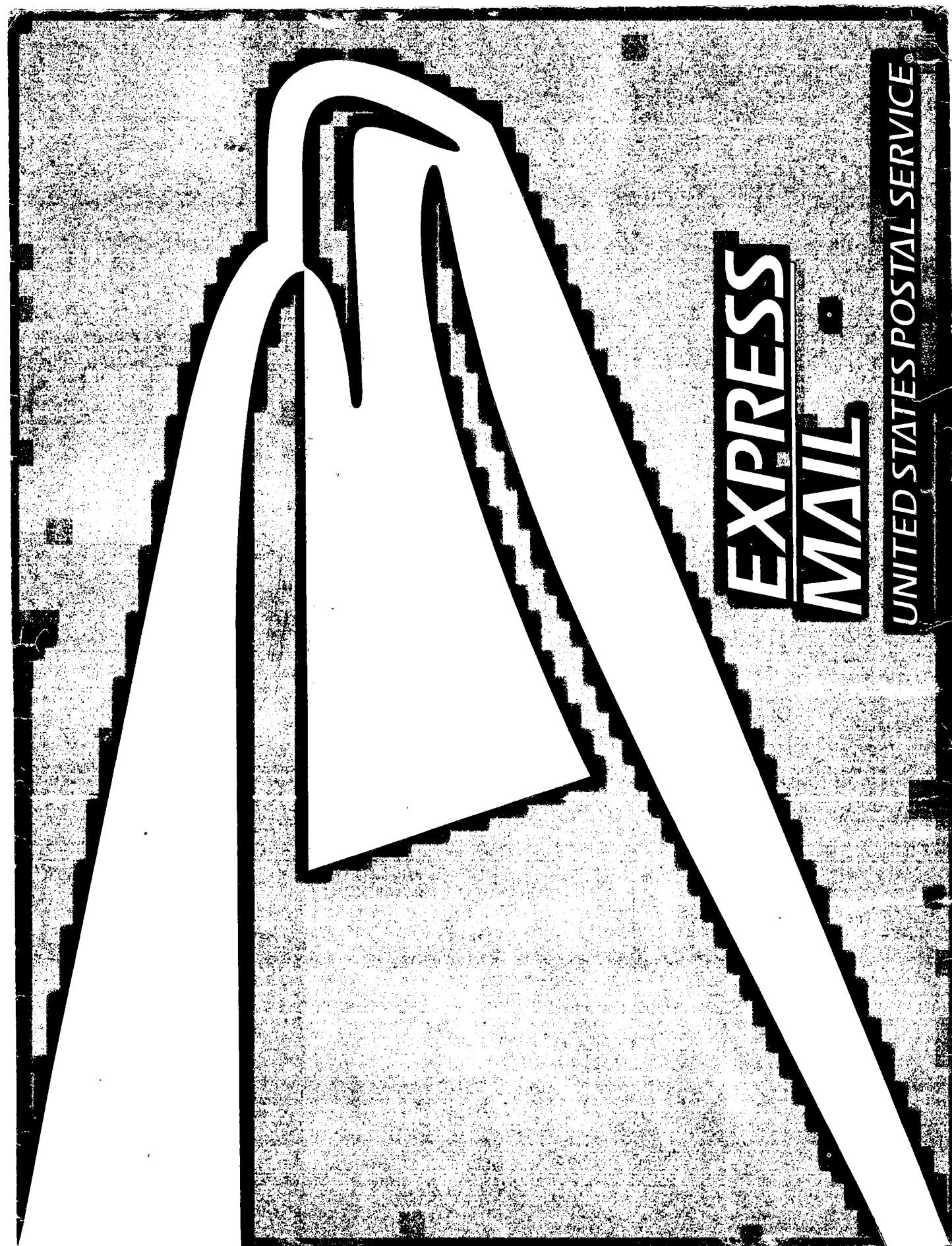




Push To Addressee

FOR PICKUP OR TRACKING CALL 1-800-222-1811

Para recolección o localización llame al 1-800-222-1811



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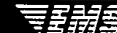
POST OFFICE TO ADDRESSEE

In customer block.

ORIGIN (POSTAL USE ONLY)				DELIVERY (POSTAL USE ONLY)			
PO ZIP Code	Day of Delivery ☐ Next ☐ Second	Flat Rate Envelope ☐		Delivery Attempt No.	Time	Employee Signature	
Date In	☐ 12 Noon ☐ 3 PM	Postage \$		Delivery Attempt No.	Time	Employee Signature	
Time In	☐ AM ☐ PM	Return Receipt Fee		Delivery Date	Time	Employee Signature	
Weight	1st Alpha Country Code	COD Fee Insurance Fee		☐ WAIVER OF SIGNATURE (Domestic Only): Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.			
No Delivery	Acceptance Clerk Initials	Total Postage & Fees \$		NO DELIVERY ☐ Weekend ☐ Holiday			
CUSTOMER USE ONLY TO FILE A CLAIM FOR DAMAGE OR LOSS OF CONTENTS, YOU MUST PRESENT THE ARTICLE, CONTAINER, AND PACKAGING TO THE USPS FOR INSPECTION.							

FROM: (PLEASE PRINT)	TO: (PLEASE PRINT)
NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION 5917 JUNCTION BLVD FL 3 FLUSHING NY 11368-5108	WFP TOWER D COLP 237 PARK AVENUE NEW YORK NY 10017

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Addressee Copy
Label 11-F August 2000

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EP-13A SEPTEMBER 1999

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