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| SERVICE CHANGE REQUEST FORM | | | | | | | Date (dd.mm.yyyy) and time (hh:mm) | | | | | | | | |  |  |
| **Ordering additional services** | | | | | | | Original posting date (p.k.vvvv) | | | | | | | | |  | |
|  | | | | | | | Original posting place (post center/terminal) | | | | | | | | |  | |
|  | | | | | | | Original posting place (other, please specify) | | | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | |
| Change ordered by | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Name of company |  | | | | | | | | | Telephone | | | |  | | | |
| Name of person |  | | | | | | | | | E-mail | | | |  | | | |
|  | | | | | | | | | | | | | | | | | |
| Basic publication information | | | | | | | | | | | | | | | | | |
| Ordering customer no. |  | | | | | | | | | Electronic Mailing List no. | | |  | | | | |
| Publication name |  | | | | | | | | | Publication no. | | |  | | | | |
| Product label |  | | | | | | | | | Mailer company | | |  | | | | |
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| Ordering additional services | | | | | | | | | | | | | | | | | |
| Change requested |  | | | | | | | | |  | | |  | | | | |
|  | | | | | | | | | | | | | | | | | |
| Posting date |  | | | | | | | | | Posting place (post center/terminal) | | |  | | | | |
| Delivery date |  | | | | | | | | | Posting place (other) | | |  | | | | |
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| Sorting by batch |  | Extra Handling Publication | | | | | |  | |  | |  | | | | | |
|  |  | | | | | |  |  | |  | | If the change does not apply to the entire batch, specify the postal code areas it applies to | | | | | |
| Batch size (pcs) |  | | | | | | | | | The postal code areas  to which the change applies | | |  | | | | |
| **Please send the completed form by email to postien.vastaanotto@posti.com** | | | | | | | | | | | | | | | | | |
| Response (the sections below are completed by Posti Oy, | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Service level agreement | Yes | |  | No |  | Limited | | |  | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Service level agreement  (more information) |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Additional Information |  | | | | | | | | | The area where the service level agreement is realised in the even of a limited SLA | | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| Unitizing level |  | | | | | | | | |  | | | | |  | | |
| Unitizing level  (other, please specify) |  | | | | | | | | |  | | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
|  | We request you to add the change row code to the PTP and change the control data and the service level markings for the products in accordance with the ordered service. | | | | | | | | | | | | | | | | |
| Change request handled by | | | | | | | | | | | | | | | | | |