



Package Pickup Authorization Form

Use this form to authorize another person to collect a package on your behalf.

1. Package Details

Tracking / notice number

2. I (the addressee) authorize the person named below to collect this package for me:

Full name

ID number

Phone number

Date

Signature

3. Authorized Person (must bring valid ID matching this form)

Full name

ID number

Phone number

Signature

4. For Post Aruba Office Use Only

ID verified

Staff name

Date collected

Branch

Bring this completed and signed form to any Post Aruba office along with a valid photo ID for the authorized person. Post Aruba may decline to release a package if the details on this form do not match the ID presented, or if the package requires the addressee's own signature under separate terms (for example, certain registered items). Questions? Visit our Help & Support page or contact us at customerservice@postaruba.com.