

ERNMENT OF THE VIRGIN ISLANDS OF THE UNITE

DEPARTMENT OF PLANNING AND NATURAL RESOURCES
Division of Comprehensive and Coastal Zone Planning
45 Mars Hill
Frederiksted, VI 00840

CERTIFIED MAIL®



7022 0410 0001 5068 3928



Cyril V. Francois Assoc. PO Box 6050 St. Thomas, VI 00804

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

230-02-000-9053	2. Article Number (Transfer from service label) 7022 0410 0001 5068 3928 PS Form 3811 July 2020 BSN 7752 28	9590 9402 7382 2028 7675 43	St. Thomas, VI, 00804	P.O. Box 6050	Cyril V. Francois Assoc.	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:
Domestic Return Receipt	Collect on Delivery Collect on Delivery Restricted Delivery Confirmation Insured Mail Restricted Delivery Cover \$500)	stricted Delivery			If YES, enter delivery address below:	A. Signature A. Received by (Printed Name) D. Is delivery on DELIVERY A Agent Addressee C. Date of Delivery