

**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.

1. Article Addressed to:

Coates Road Apartments LP  
382 NE 191 St. #22255  
Miami FL 33179



9590 9402 4372 8190 5212 37

2. Article Number (Transfer from service label)

7020 2450 0002 2668 2361

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

B. Redeived by (Printed Name)

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Agent☐ Addressee

C. Date of Delivery

☐ Yes☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery  
(over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted  
Delivery☒ Return Receipt for  
Merchandise☐ Signature Confirmation™☐ Signature Confirmation  
Restricted Delivery

USPS TRACKING #



HARNETT CO NC 27546

31 MAR 2023 PM 4 L



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

9590 9402 4372 8190 5212 37

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH  
ENVIRONMENTAL HEALTH SECTION  
307 W. CORNELIUS HARNETT BOULEVARD  
LILLINGTON, NC 27546

