



Do not complete this form unless the sale has been finalized and there is a commitment from the customer to use Customized Packaging Supplies.

Customized Packaging Business Case

A. Business Case

1. eBay Requisition Number _____		2. Company Name _____	
3. Company Address (Number, street, suite, etc.) _____		4. City _____	5. State _____
		6. ZIP+4® _____	
7. Company Contact _____		8. Company Contact Telephone No. (include area code and extension) _____	
9. USPS® Sales Representative _____	10. Telephone No. (include area code and extension) _____	11. Email address _____	
12. BSN Representative _____	13. Telephone No. (include area code and extension) _____	14. Email address _____	
15. OIS Representative _____	16. Telephone No. (include area code and extension) _____	17. Email address _____	

B. Background Information

18. Describe Company/Industry (manufacturing, sales, trade group, non-profit)

19. What does company ship?

20. Is the company currently using US Postal Service® as one of their package delivery service providers?
Yes No

21. If yes, what was Express Mail® and Priority Mail® service revenue and approximate volume total last year?
 EM Rev. _____ EM Vol. _____ PM Rev. _____ PM Vol. _____
TOTAL Express Mail and Priority Mail Revenue _____
TOTAL Express Mail and Priority Mail Volume _____

22. Is the company (or parent/sister companies) currently participating in US Postal Service Expedited Packaging Supplies Program?
Yes No

23. What percentage of other package delivery service provider(s) does the company currently use? (Check all that apply)
 DHL _____ % FedEX _____ % UPS _____ % Other (please specify) _____ %

24. What is the company's growth rate?
_____ %

25. How long have you been in the sales cycle with this company? (Please check appropriate response)
 Less than 1 year ___ 1 to 2 years ___ 2 to 3 years ___ More than 3 years ___

C. Business Opportunity

26. Estimated Annual Volume = \$ _____ Average Revenue Per Piece = \$ _____ Estimated Annual Revenue = \$ _____

27. Percentage of company's package delivery business USPS will have if sale is closed? _____ %

28. Identify cost savings company will experience due to US Postal Service providing packaging? \$ _____

29. Identify any additional costs that may be associated with this new business. (Explain, e.g. collection/transportation, special trips, etc.)

30. Identify consequences if Customized Packaging Supplies are not provided. (Explain)

C. Business Opportunity <i>(continued)</i>				
31. USPS Sales Representative			32. USPS Office Street Address <i>(Number, street, suite, etc.)</i>	
33. City	34. State	35. ZIP +4	36. Telephone No. <i>(include area code and extension)</i>	37. Email address
38. BSN Representative			39. Telephone No. <i>(include area code and extension)</i>	40. Email address
41. OIS Representative			42. Telephone No. <i>(include area code and extension)</i>	43. Email address

C. Business Opportunity <i>(continued)</i> Company Information				
44. Company Name			45. Customer Contact at Delivery Address	
46. City	47. State	48. ZIP +4	49. Customer Telephone No. at Delivery Address <i>(include area code)</i>	
50. Customer Contact Email Address			51. Customer Contact Cell Phone No. <i>(include area code)</i>	

D. Package Specifications					
52. Is personalization requested? Yes <input type="checkbox"/> No <input type="checkbox"/>		53. Is customer artwork attached? Yes <input type="checkbox"/> No <input type="checkbox"/>		Please provide annual revenue and volume by box/envelope size.	
54. Product Dimensions <i>(list all sizes requested)</i> Length (L) X Width (W) X Depth (D)	Check		Average Revenue Per Piece X	Estimated Annual Volume X	Estimated Annual Revenue =
	Envelope	Box			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
L _____ W _____ D _____	<input type="checkbox"/>	<input type="checkbox"/>			
Artwork must be a vector file (from a draw program) saved as .EPS; Adobe Illustrator files are preferred. Web graphics are not acceptable.			TOTAL		

D. Package Specifications *(continued)*

Complete the information requested below ONLY if your customer would like to have his present vendor bid on the possible contract.

55. Company Name			56. Company Contact		
57. City	58. State	59. ZIP +4	60. Telephone No. <i>(include area code and extension)</i>		
62. Company Email Address			63. Contact Cell Phone No. <i>(include area code)</i>		

E. Quantities

64. Please indicate if this shipment is: One Time <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/>		65. Is This Business Seasonal? Yes <input type="checkbox"/> No <input type="checkbox"/>	66. Is This New Business? Yes <input type="checkbox"/> No <input type="checkbox"/>
67. If this is new business, which competitor was it taken from? DHL <input type="checkbox"/> FedEx <input type="checkbox"/> UPS <input type="checkbox"/> Other <i>(please specify)</i> <input type="checkbox"/>		68. Expected Growth Rate? _____ %	
69. What method of payment does customer use? <i>(Account Number)</i>			
Click N Ship® <input type="checkbox"/> Metered Postage <input type="checkbox"/> PC Postage™ <input type="checkbox"/> Stamps <input type="checkbox"/> Express Mail <input type="checkbox"/> OMAS <input type="checkbox"/> Permit Imprint <input type="checkbox"/> Other <i>(specify)</i> <input type="checkbox"/> Corporate Account <input type="checkbox"/>			

IMPORTANT: The initial shipment takes 6 to 8 weeks after all approvals have been secured, including approvals for ALL artwork proofs.

F. Delivery and Dock Information

IT IS THE RESPONSIBILITY OF THE CUSTOMER TO UNLOAD THE TRUCK UPON ARRIVAL.

70. Company Delivery Address <i>(Provide complete street address; number, etc.)</i>		
71. City	72. State	73. ZIP +4
74. Contact Person at Delivery Location		75. Provide any special instructions, circumstances, and directions for delivery.
76. Contact Person at Delivery Location Email address		
77. Contact Person at Delivery Location Telephone No. <i>(include area code and extension)</i>		
78. Does customer have loading dock that will accept tractor trailer? Yes <input type="checkbox"/> No <input type="checkbox"/>		
80. Are there any length or height restrictions? Yes <input type="checkbox"/> No <input type="checkbox"/>		79. If yes, what are the restrictions? <i>(Explain)</i>
81. Please describe loading dock conditions <i>(Describe unusual or hazardous conditions)</i>		
82. Does customer have fork lift or power jack? Yes <input type="checkbox"/> No <input type="checkbox"/>	83. Does customer have the necessary storage space? Yes <input type="checkbox"/> No <input type="checkbox"/>	84. Starting Delivery Date? <i>(MM/DD/YYYY)</i> _____

**Customized Packaging
Business Case** *(continued)*

G. Contact Information

85. Company Name	86. Company Contact	87. eBuy Requisition Number _____
88. Company Contact Telephone No. <i>(include area code, and extension)</i>	89. Company Contact Email	
90. USPS® Sales Representative	91. Telephone No. <i>(include area code and extension)</i>	92. Email address
93. BSN Representative	94. Telephone No. <i>(include area code and extension)</i>	95. Email address
96. OIS Representative	97. Telephone No. <i>(include area code and extension)</i>	98. Email address

H. Signatures

I understand that Express Mail and Priority Mail packaging is the property of the United States Postal Service and is provided solely for the use in sending Express and Priority Mail. Misuse may be a violation of federal law. I agree that the U.S. Postal Service is producing customized Express Mail and/or Priority Mail packaging for my company. This is being done at no charge, or with minor cost sharing, to my company. In the event that our company decides to no longer use this customized Express Mail and/or Priority Mail packaging, we are responsible for providing a minimum of two months notice, in writing, to our Postal Service™ Sales Representative. If we do not provide this notice, we will be responsible for purchasing the two month supply (or less, depending upon the quantity of packaging that the supplier has produced) of customized packaging supplies, based on the quantity requested above.

99. Yes, _____, owns the company logo trademark(s).

100. The following information must be included at the time of reorder:

Current FY Revenue for Customized Packaging _____ Data Source _____

The Postal Service reserves the right to discontinue providing Customized Packaging if the minimum annual revenue criteria of \$250,000 has not been met.

101. Company Representative Signature and Title	102. Date <i>(MM/DD/YYYY)</i>
103. USPS Sales Representative Signature and Title	104. Date <i>(MM/DD/YYYY)</i>
105. OIS Representative Signature	106. Date <i>(MM/DD/YYYY)</i>

Express Mail® and Priority Mail® packaging is the property of the United States Postal Service® and is provided solely for the use in sending Express Mail or Priority Mail services. Misuse may be a violation of federal law. Express Mail, Priority Mail, United States Postal Service, Post Office™, The Postal Store®, Parcel Post®, Delivery Confirmation Service™, Signature Confirmation Service™, Certified Mail™, ZIP + 4®, U.S. Postal Service™ and USPS® are among the trademarks owned by the United States Postal Service. All rights reserved.