

Bulk Proof of Delivery Application

A. Program Information

Bulk Proof of Delivery provides mailers the opportunity to receive proof of delivery (delivery record) information in bulk. Participation is limited to mailers who use a Mailer ID in their labels or in an electronic file. Mailers previously registered with the Postal Service may use their existing DUNS Number as their Mailer ID. Customers not previously registered with the Postal Service will be assigned a Mailer ID. Mailers must complete a certification process and/or authorization process to participate. See Pub. 80, *Bulk Proof of Delivery Program,* for general program details. See Pub. 91, *Confirmation Services Technical Guide,* for certification details. The company/mail owner (not a third-party designee) must complete this form. See Page 2 for instructions on completion. Please print or type when completing this form.

B. Mailer Information					(Ple	ase print or type)	
1. Company Name				ay's Date			
2 Mailer ID (obtained from Posta		8. Poin	8. Point of Contact				
3. Street Address (Number, street, suite. apt., etc.)			9. E-m	9. E-mail Address of Company Point of Contact			
			10. Tel	10. Telephone Number and Extension			
4. City	5. State	6. ZIP+4 [®]	11. Fax	Number/Vendor Software	or Shipping System		
C. Delivery Preferences ar	d Methods						
12. Delivery Preference			13 Ele	ctronic File Submission			
Send Records to Third-Party Designee Send Records to Mailer				☐ Yes, by Mailer ☐ Yes, by Third-Party Designee ☐ No			
	print my own la nic files (if app	abels and/or send my ow licable) If you selected o	n electronic files	(if applicable). □ b. No, vou selected the third-party	a third-party designee p		
(Third-party Designee Company Name) (Third-party Designee Fax			nee Fax Number)	(Third-party Design	ee DUNS Number/Mailer ID*)	different than your DUNS Number/Mailer ID, which must be listed in Section B, above.	
(Third-party Contact Name)		(Third-party Telepho	one Number)				
I want records for the DU	INS numbers/I	Mailer IDs listed below co	onsolidated into	the DUNS Number/Mailer II	D listed in Item 2 above:		
	gnature Extra	ct file (via File Transfer P	,	16b. Record Grouping:	Combined Rec	()	
17. Express Mail and/or Special	Services (* - l	Users must pay additonal	l fees for each re	ecord for the four services i	ndicated see Pub. 80 i	for details.)	
 □ Express Mail® (manifest mailers only) □ Signature Confirmation™ Service □ *COD Mail 					 *Insured Mail *Registered Mail™		
18. Payment Methods <i>(Select particular)</i> a. Pay at Mailing b. Pay as Compiled		Meter			PC Postage		
D. Application Submissio	n Process						
19. Fax, scan or mail completed form to: CONFIRMATION SERVICES SUPPORT				Questions about completing this form? Call Confirmation Services Support at 877-264-9693, Option 1.			
NATIONAL CUSTOMER SUPPORT CENTER UNITED STATES POSTAL SERVICE 6060 PRIMACY PARKWAY SUITE 201 MEMPHIS TN 38188-0001 Fax Number: 901-821-6244 DELIVERY.CONFIRMATION@USPS.GOV			20. Notes/Comments: (Use an attachment if necessary.)				
			21. Requestor's Signature				
E. Completed by Postal S	ervice Repr	esentative					
22. Name and Title	23. Phone Number	r and Extension 24. Area and District					

Instructions for completing PS 5053

Items 1-8 contain information on the company that owns the mail and the corresponding proof of delivery records. That company (referred to as the mailer) must complete this application. A third-party designee (such as a consolidator or vendor) cannot complete it for the mailer.

- Item 1: Insert the name of your company (this must be the company that owns the mail).
- Item 2: The Postal Service will assign a Mailer ID to new applicants. Customers who have previously registered with the USPS may use their existing DUNS Number as their Mailer ID.
- Item 3: Complete your company street address.
- Item 4: City
- Item 5: Use the appropriate two-letter abbreviation for your state -- e.g., use "MD" for Maryland.
- Item 6: ZIP+4
- Item 7: Insert the date you are completing/submitting the application.
- Item 8: Provide the name of the person in your company who will be the main point of contact for this program.
- Item 9: Provide the e-mail address of your company contact person.
- Item 10: Provide the telephone number and extension of your company contact person.
- Item 11: Provide the fax number of your company contact person. Provide vendor software or shipping system name as appropriate.

Items 9-16 contain information on your delivery preference, if you will be submitting electronic files, certification issues, method of delivery, service types being used, and payment methods. Follow these instructions for completion to avoid delays in processing your application.

- Item 12: Indicate if you would like your proof of delivery records sent to you or to a third-party designee (consolidator/vendor). Please indicate your preference in this section. Note: Third-party designees are eligible to receive proof of delivery information if authorized by the mailer. If you use a third-party designee for mailing services, proof of delivery information may be sent to you or your designee. If you select a third-party designee to receive your proof of delivery records, this form serves as your official authorization allowing the Postal Service to provide all your proof of delivery records to this third party.
- Item 13: All customers mailing electronic option Signature Confirmation service or those choosing the Pay at Mailing method are required to submit electronic files. Indicate if you or your third-party designee will be submitting an electronic file on a regular basis.
- Item 14: Indicate if you print your own labels and/or send your own files or if you use a third-party designee to print your labels and/or send your files. If you select option 14b, you must provide your third-party designee company name, fax number, existing DUNS Number or Mailer ID, contact name, and phone number. Note: If a third-party designee submits electronic files, your third-party designee must place your DUNS Number in the label number itself or the Client DUNS Number field of the electronic file for the Postal Service to compile and provide your proof of delivery records.
- Item 15: If your company has existing multiple DUNS Numbers or Mailer IDs that you want to compile into one file, please specify your preference in this section. This can be used if you are certified to print your own labels and/or send your own electronic files or if you are using a third-party designee to print your labels and/or send your electronic files.
- Item 16a: Designate your preferred method of record delivery. Choose either CD-ROM (compiled the 1st and the 15th of the month) or Signature Extract File (compiled every Monday). Choose only one option. If you choose the Signature Extract File option, you must participate in the electronic file submission process. See Publication 91, *Confirmation Services Technical Guide*, for information on sending and retrieving files.
- Item 16b: Designate the preferred method for receiving records. Choose to receive records combined into a single PDF file (with up to 1000 records per file) or records that are individual, meaning that each PDF file contains one record. The individual records option includes no table of contents and all individual records will be compressed using file extension ".tar". If your company uses different, existing DUNS Numbers/ Mailer IDs for different services, then complete a separate PS Form 5053 for each service and existing DUNS Number/Mailer ID number.
- Item 17: Indicate whether you will be using Express Mail and/or any special services. Check each box for which you require records. If your company uses different, existing DUNS Numbers/Mailer IDs for different services, then complete a separate PS Form 5053 for each service and existing DUNS Number/Mailer ID.
- Item 18: Specify your preferred payment method. Mailers can pay at the time of mailing (Pay at Mailing) with postage meters or PC Postage or pay by (credit card) at the time the Postal Service compiles the proof of delivery records (Pay as Compiled). For the Pay at Mailing option, an electronic file is required. If you are using Express Mail or Signature Confirmation service, a payment method is not applicable (these records are provided for no additional fee). If you pay by credit card, you must complete PS Form 5054, *Bulk Proof of Delivery Payment Authorization*.
- Item 19: Fax, scan or mail completed form as indicated.
- Item 20: Provide any notes or comments.
- Item 21: The point of contact listed in item 8 must sign the form here.

Items 22-24 are reserved for use by the Postal Service.