UNITED STATES POSTAL SERVICE®

# Printer Certification Submission

## Customer Information

*(Please print or type)*

| 1. Company/Customer Name | 2. Date | 3. Company Web site |
|---|---|---|
| | | |

| 4. Street Address *(No., street, ste. no., city, state, ZIP + 4®)* | 5. Point(s) of Contact |
|---|---|
| | 6. E-mail Address of Company Point(s) of Contact |

| 7. Phone Number and Extension | 8. Fax Number | 9. Mailer ID |
|---|---|---|
| | | |

## One Printer Certification Form must be completed for each site that will be printing labels

1. Are you applying for electronic file certification and printer certification? **Yes** ☐ **No** ☐
2. Are you applying for printer certification only? **Yes** ☑ **No** ☐

## Instructions for providing printer information

Enclose, with this form, the labels from each printer that will be used to print labels with bar code numbers (minimum 10 per printer). List those printers below with their brand names, model numbers, and serial numbers. On each group of labels from one printer, write on the first label or attach a note indicating the printer number from the list below.

| Printer Number | Printer Brand Name | Printer Model Number | Printer Serial Number |
|---|---|---|---|
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## Send completed form, with the labels enclosed and identified by printer number, to:

ATTENTION: CONFIRMATION SERVICES CERTIFICATION SUPPORT
NATIONAL CUSTOMER SUPPORT CENTER
UNITED STATES POSTAL SERVICE
6060 PRIMACY PKWY STE 101
MEMPHIS TN 38188-0001

Signature of Contact Person _____ Date _____

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