

Bulk Mail / Postal Control Number Request Form

Please complete this form for all Permit 104 Mailings

Complete and submit this form including all required fields, with any Bulk Mailing project whether processed by your department or by a vendor. If using a vendor, a Postal Control Number is required. Mail Services will contact the vendor and provide them with a Postal Control Number after receiving this completed form. Mail Services will return a copy of this form for your records. Mail Services is required to keep a sample of all permit 104 mailings. Please provide us with a copy of your Bulk Mailing project when submitting this form.

** Required Fields*

1. Department Information

- * Department Name: _____
- * Contact Email: _____
- * Mail Code: _____
- * Extension: _____
- * Department Contact Name: _____

2. Project Information

- * Mail Project Name / Description: _____
- * LVPA Number: _____
- Letter Mailing Flat Mailing * Piece Count: _____

3. Vendor Information

Vendor Name: _____

Vendor Phone: _____ Vendor Fax: _____ Vendor

Contact Name: _____

Contact Email: _____

POSTAL CONTROL NUMBER

Please return this form via: