| United States Postal Service® Mailing Permit Application and Customer Profile | A. Applicant Information (Please print or type requested information) 1. Mail Owner (Individual or Company Name) 2. Date | | | | | Permit Imprint Authorization (Please keep this card for your records. Instructions available on reverse.) | | |
|---|--|---|-----------------|----------------------------------|--|---|---|-------------------|
| Instructions available on reverse | | | | | | Permit Number | Date Permit Issued | Issuing Office |
| Two forms of identification are required when submitting this application. One form of ID | 3. Applicant's Signature *(See Privacy Notice | e below) | 4. Email Addres | s (required if | known) | ! ! ! | | Onice |
| must contain a photograph of the applicant(s). The applicant must enter the two ID numbers | | , | | ` ' | , | Application Fee Due | AIC | 1 |
| on line 8a and line 8b which is subject to verification by the postal employee completing the application. Social Security cards, credit cards and birth certificates are not acceptable forms of identification. | | dress (Street and number, apt. or suite no., city, state, and ZIP + 4®) | | | | | \$ Postmaster or Designee Signature | |
| 6. Other Names Under Which Company Does | Business (If applicable) | | 7. How Can We | Contact You | ? | 1 1 1 | | |
| | ☐ Telephone ☐ Email ☐ | | | | □ Mail | Authorization for Pro | ancolod Stamps | or |
| 8a. Enter first ID number. | 9. Federal Agency Cost Code (If applicable) | Authorization for Frecanceled Stan | | | systems (Meter/P resorted Mail in l | C Bulk | | |
| 8b. Enter second ID number. | 11. Contact Person | | 12. Telephone N | | | available on reverse.) | | |
| | | | · | · | , | · · · · · · · · · · · · · · · · · · · | | Issuing Office |
| B. Check Applicable Type of Perm | nit/Authorization Requested | Fo | Postal Serv | rice™ Use | Only | 1 1 1 | | |
| Will you be mailing anything that is liquid, frag See DMM 601 Yes □ | | ally hazardous? Permit Date Date Sample Postm Number Issued Canceled Approved | | Postmaster or Designee Signature | | | | |
| 1. Permit Imprint Authorization (One the First-Class® Mail Standard Mail | Damait | | | | | | | J |
| 2. Precanceled Stamp Authorization* | , | | | | | Business Reply Mail A (Please keep this card for yo available on reverse.) | Authorization ur records. Instructions | 5 |
| Government Precanceled Stamped Envelope Authorization* | | | | | | Permit Number | Date Permit Issued | Issuing Office |
| Mailer Precanceled Postmark/Preprinted Rate Markings Authorization* | | | | | | Fee Due | Unique BRM ZIP+4(s | (3) |
| See DMM 604.3 Preprinting of Rate Markings Mailer Precancel Postmark 3. Preprinting of Rate Markings Mailer Precancel Postmark | | | | | | \$ | | - |
| Postage Evidencing System (Meter | r/PC Postage™) Authorization* | | | | | BRM w/Advance Deposit Account Maintenance Fee | | \dashv |
| 4. Business Reply Mail™ (BRM) Auth | orization** | | | | | Due \$ | | |
| (Cards, Letters and Flats Only) | | | | | | Postmaster or Designee Signature | | |
| b. Post Office where BRM permit number was issued and annual fee was paid, if applicable: (a) (b) | | | | | | Merchandise Return S | | |
| Business Reply Mail Account Main | tenance Fee (For advance deposit account)*** | * | | | | (Please keep this card for you available on reverse.) | | _ |
| Qualified Business Reply Mail™ (Q | BRM) Approved*** | | | | | Permit Number | Date Permit Issued | Issuing Office |
| 5. Merchandise Return Service (MRS) Authorization (Select below)*** | | | | | | Fees Due | AIC | 4 |
| a. Type of Application Initial Single Reapplication Multiple B. Return Location If Multiple Return locations are selected, complete appropriate section on back of form. | | * Annual mailing fee is required to present presorted mail ** Annual permit fee required *** Annual permit and annual account | | | | \$ | 141 | |
| PS Form 3615 , January 2014 PSN 7530-03-000-6048 | | main | tenance fee req | uired | | Postmaster or Designee Sigr | nature | |

Standards for Mailing Using Permit Imprints

- The content and format must meet the standards in the Domestic Mail Manual (DMM®).
- Mail must be presented and accepted where the permit was issued unless permitted by other applicable standards.
- 3. Payment for each mailing must be made when the mailing is presented at the Post Office.
- Mail must not be deposited in street collection boxes.
- Minimum quantities apply and all pieces must be of identical weight, unless otherwise authorized.

NOTE: Application fee applies. Annual fees apply to presort or destination entry mail.

Standards for Precanceled Stamps or Postage Evidencing Systems (Meters/PC Postage) to Present Presorted Mailings

Presorted mail must:

- Be presented for acceptance and verification where the permit is held.
- 2. Not be deposited in street collection boxes.
- 3. Bear markings and endorsements required for the rate claimed or service requested.
- 4. Bear a complete return address (Precanceled stamp mail).

NOTE: Annual fees apply to presort or destination entry mail. Obtain appropriate meter slug from meter manufacturer.

Standards for Business Reply Mail (BRM)

- Permit holder guarantees payment for proper First-Class™ postage, plus a per-piece fee.
- 2. Permitted for cards, letters, and flats only.
- 3. No extra services are permitted.
- 4. Mail may not be converted for any other purpose than that intended by the permit holder.
- 5. Format requirements apply.
- 6. Annual permit applies.
- 7. Annual account maintenance fee may apply.

Standards for Merchandise Return Service (MRS)

- Permit holder guarantees payment of proper postage and extra service fees (except for extra service fees purchased by the customer) on all parcels returned via a special label produced by the permit holder.
- 2. Extra services are available.
- 3. Format samples must be approved before using MRS.
- 4. Annual permit fee applies.
- 5. Annual account maintenance fee applies.
- 6. Foreign services are unavailable.

Instructions (For information about postage payment methods and permits, please refer to the DMM)

This form creates a comprehensive file about customers who use these services, including a record of customers mailing in bulk with meter postage affixed and those who are presenting plant verified drop shipment (PVDS) or approved for Qualified Business Reply Mail (QBRM) rates. This form also documents when permits were issued or canceled, initial fees paid, and samples approved. You may use one form and update it as needed. If files are kept in separate locations, you may use a separate form for each service.

2.0

3.0

8.0

Mailability, DMM 601

Packaging

Perishables

10.0 Hazardous Materials

General Standards

Acceptable Mailing Containers

Cushioning, Closure, and Reinforcement

11.0 Other Restricted and Nonmailable Matter

12.0 Written, Printed, and Graphic Matter Generally

REMINDER:

presorted mail

** Annual permit fee required

maintenance fee required

*** Annual permit and annual account

Handling, Content, and Extra Service Markings

Mailing Containers—Special Types of Envelopes and Packaging

Packaging Standards for Mail Processed at Bulk Mail Centers

Nonmailable and Restricted Articles and Substances Generally

Annual mailing fee is required to present

How to Complete This Form Section A, Applicant Information

January 2014

3615,

Detached from Form

January 2014

Detached from Form 3615,

2014

January

Form **3615**,

from I

Detached

- Enter applicant's name and company/agency name under which mailings will be entered.
- 2. Enter the date application was completed.
- 3. Signature of person completing form.
- 4. Applicant's email address or contact email address.
- 5. Enter the complete company mailing address.
- Enter all other names under which company does business.
 Enter method(s) of contact.
- 8. a. Complete first form of identification number.
 - b. Complete second form of identification number.
- Complete if applicant is a federal agency presenting mail under Official Mail Accounting System (OMAS).
- Indicate whether mailer is or will be presenting plant verified drop shipments (PVDS). (For informational purposes only).
- 11. Enter the name of the contact person (a person with whom Postal Service personnel can discuss mailing differences, etc.).
- 12. Enter the telephone number (include area code) of contact person named in item 11.

Section B, Check Type of Permit/Authorization Requested

- Complete if mailer will mail using a permit imprint.
- Complete if mailer will mail using:

Precanceled stamps.

Government precanceled stamped envelopes.

- a. Mailer precanceled postmark.
- b. Preprinted rate markings authorization (check appropriately).
- 3. Complete if mailer will mail using a postage evidencing system (Meter/PC Postage).
 - Complete if mailer applies for a Business Reply Mail permit.
 - a. Post Office (Station or Branch) where mail will be received.
 - b. Post Office where BRM permit number was issued/annual fee was paid, if applicable.

Check if Business Reply Mail Annual Account Maintenance Fee was paid.

Complete/check if Qualified Business Reply Mail (QBRM) Approved.

- 5. Complete if mailer requests a Merchandise Return Service (MRS) authorization.
 - a. Check "Initial" if a first-time applicant for Merchandise Return Service. NOTE: Check "Reapplication" if mailer has been denied and wants to reapply.
 - b. Indicate whether mailer will return MRS at single or multiple locations.

What to Give the Customer

Complete and detach the coupon corresponding to the service(s) requested and give to the customer. Advise the customer to keep their coupon(s) to reference the account(s). Customers should keep the coupon(s) along with their copy(ies) of PS Form 3544, *Post Office Receipt for Money,* which they will receive after paying the required fee.

How to File This Form

File the form alphabetically by customer's business name. Post Offices where records are maintained manually must use PS Form 3609, Record of Permit Imprint Mailings, to establish a corresponding numerical record of permit holders. Use PS Form 25, Trust Fund Account, for all other services. Post Offices with a mail classification automated system (such as the Postal One!® system) that provides computation and individual customer account recordkeeping need not maintain a separate manual record.

| Multiple Return Lo | ocations (See B5 on a | | enter City, State, and 5-digit ZIP Codes ™ for each location. Attach spreadsheet to this application if there are more than 12 multiple return locations. | | | | |
|--------------------|-----------------------|----|---|-----|-----|--|--|
| 1. | 2. | 3. | 4. | 5. | 6. | | |
| 7. | 8. | 9. | 10. | 11. | 12. | | |

PS Form **3615.** January 2014 (Reverse)

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|-----------------|--------------|
| Form | |
| Detached from I | January 2014 |
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