UNITED STATES POSTAL SERVICE ®

Optional Procedure (OP) Mailing System Application

Before completing this application, review *Domestic Mail Manual* (DMM) P920, *Optional Procedure Mailing System,* and Publication 407, *Optional Procedure (OP) Mailing System.*

Type or print legibly

I - Contact Person Information

Name

Title

Telephone Number
(Include area code)

Fax Number
(Include area code)

Email Address

II - Address Information

Company Name

Address *(Number, street, ste., city, state, ZIP + 4)*

Signature

Date Signed

III - Mailer/Applicant Profile

Complete the hours of operation, by day, as applicable:

Sunday	Monday	Tuesday	Wednesday
Thursday	Friday	Saturday	

Software

Is your address matching software CASS certified? ☐ Yes ☐ No

Is your presort software PAVE certified? ☐ Yes ☐ No

Hardware *(Check all that apply)*

☐ OCR ☐ BCS ☐ MLOCR ☐ Platform Scale ☐ Electronic Sampling Scale

☐ Other *(List):*

Program Participation *(Check all that apply)*

☐ Plant-Load
☐ Address Change Service (ACS)
☐ *FASTforward*
☐ Mail Preparation Total Quality Management Program (MPTQM)
☐ Other:

☐ Plant-Verified Drop Shipment (PVDS)
☐ Computerized Delivery Sequence (CDS)
☐ Drop-Shipment Management System (DSMS)
☐ *PostalOne!*

Address Technology *(Check all that apply)*

☐ Inkjet ☐ Computerized ☐ Paper/Self-Adhesive Labels

☐ Other *(List):*

Mail Description *(Check all that apply)*

Classes of Mail: ☐ First-Class® Mail ☐ Standard Mail ☐ Package Services ☐ International Mail

Processing Categories: ☐ Letters ☐ Flats ☐ Machinable Parcels ☐ Irregular Parcels

General

Will mailings be verified and/or accepted at your facility? ☐ Yes ☐ No

Will mailings be verified and/or accepted at the administering Post Office? ☐ Yes ☐ No

Is your firm authorized to commingle multiple permit imprints in a single mailing? ☐ Yes ☐ No

If YES, enter the unique permit imprint account number for commingled permit mailings:

Audit Trail Documentation

List the records/documents your company routinely uses that will support your Optional Procedure audit trail. At a minimum, those records must include:

Production Records (If your company produces the product being mailed)

Standardized Presort Documentation

CASS Report (If applicable)

Customer Bill/Invoice

Inkjet Reorder Report (Only for Standard Mail flat-size mailings in which the address is applied by inkjet)

Spoiled or Damaged Report (For spoiled or damaged addressed mailpieces)

Quality Control Documentation

NOTE: Additional documentation may be required, depending on the type of mail presented under Optional Procedure.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Submitting the Application

In support of this application you must submit the following:

1. A detailed flow chart of your production operation.

2. Detailed quality control procedures.

3. A sample job jacket including:

   a. All of the records in the proposed audit trail for the sample job.

   b. A sample of a mailpiece from the sample job.

   c. A copy or copies of postage statement(s) for the sample job.

4. A description of each audit trail record/document.

> **Submit the application and all supporting documentation to the postmaster serving your plant.**

Postmaster

Complete PS Form 3632, *Optional Procedural (OP) Application Review Checklist,* for this mailer application and sign and date below with your recommendation for approval or denial.

☐ Recommend Approval

☐ Recommend Denial *(State reasons):*

Signature *(Administering Postmaster or designated representative)*	Date Signed

District Manager

Review the Application Checklist submitted with this application and sign and date below with your recommendation for approval or denial.

☐ Recommend Approval

☐ Recommend Denial *(State reasons):*

Signature *(District Manager or designated representative)*	Date Signed

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