NCOA^{Link®} Full and Limited Service Providers Definitions and Certification Procedures

NCOA Link Full Service Providers and Limited Service Providers are described below:

NCOA Link Full Service Provider Licensees:

Full Service Provider Licensees will be required to provide ZIP + 4® Coding, DPV®, and LACS^{Link®} services as well as any future address hygiene products that USPS requires under the NCOA^{Link} License Agreement. License fees for the products USPS currently requires are included in the NCOA^{Link} Full Service license fee. A Full Service Provider's use of the NCOA^{Link} product for processing its own lists (including any subsidiary or affiliate) shall not exceed 50% of all input name and address records processed through Licensee's NCOA^{Link} system during a twelve month period. USPS will provide Full Service Provider Licensees with full 48-month NCOA^{Link} datasets on a weekly basis. To become a Full Service Provider, applicant must satisfy the application requirements and be in good standing under existing license agreements prior to being eligible to enter into an NCOA^{Link} License Agreement with USPS.

NCOA Limited Service Provider Licensees:

Limited Service Provider Licensees may elect to provide DPV and LACS^{Link} processing but are not required to offer these services under the NCOA^{Link} License Agreement. Any applicable license and/or product fees will be charged separately to these Licensees. NCOA^{Link} datasets for an 18-month period will be provided weekly to these Licensees. To become a Limited Service Provider, applicant must satisfy the application requirements and be in good standing under existing license agreements prior to being eligible to enter into an NCOA^{Link} License Agreement with USPS.

A certification package must be completed for each individual site seeking to provide NCOA^{Link} processing.

Full requirements are set forth in the USPS NCOA^{Link} License Agreements and related documents. In the event of a conflict between this document and the standard NCOA^{Link} License Agreement, the terms of the NCOA^{Link} License Agreement prevail.

The following material describes the necessary steps of the certification process to qualify for a license to the NCOA^{Link} Product. Information necessary to complete all steps of the certification process is included. Applicants may work on all steps simultaneously if they desire to do so.

Applicants must submit all materials to USPS at:

NCOA^{Link} PRODUCT DEPARTMENT NATIONAL CUSTOMER SUPPORT CENTER UNITED STATES POSTAL SERVICE 225 N HUMPHREYS BLVD STE 501 MEMPHIS TN 38188-1001 FAX: 650-577-5773

Step 1. Application and Self-Certification Statement Approval

The following documentation must be completed and submitted by Applicant and approved by the USPS:

- Application
- · Confidentiality Statement
- Self-Certification Statement
- Key Personnel Listing
- Security Documentation
- Electronic Product Fulfillment Web Access Request Form (NCOA^{Link} Daily Delete files and weekly product updates)

USPS will notify Applicant if it determines that Applicant has completed Step 1 to the satisfaction of USPS.

Step 2. Software Acquisition

Upon satisfaction of Step 1 requirements, USPS will provide applicant with an authorization code necessary to obtain NCOA^{Link} software. Applicant may either purchase software certified by USPS (authorization code required) from an NCOA^{Link} software distributor that has entered into a license agreement with USPS, or develop software for use in the Applicant's processing environment.

If Applicant elects to purchase software, Applicant may proceed to Step 3 upon acquisition of software.

If Applicant elects to develop interface software, the applicant must enter into an NCOA Software Developer License Agreement with USPS. Under this separate license agreement, Applicant must develop interface software and apply for USPS certification prior to using that software.

After Applicant obtains USPS certified NCOA^{Link} software, through purchase or development, Applicant must notify the USPS to receive the NCOA^{Link} test data and may proceed to Step 3.

Step 3. NCOA Link Testing & Certification

Applicant must submit to USPS a written request and a Software Product Information Form requesting that USPS perform an NCOA^{Link} certification test. The USPS will notify Applicant when it has sent a test file. (While NCOA^{Link} testing will usually occur remotely, USPS reserves the right to perform testing on-site.)

The following items are tested in Step 3:

- Ability to correctly process test files
- Ability to provide new addresses in accordance with NCOA Link Product requirements
- Ability to produce output file with appended flags
- Understanding and performance of administrative requirements which includes processing the certification test and submitting the proper paper work and/or reports.

If USPS determines that Applicant fails the initial certification test, Applicant may submit to USPS a written request for an additional certification test. USPS will require payment of the retesting fee for each additional certification test.

Step 4. Execution of License Agreement

NOTE: We recommend submitting a copy of the License Agreement located on our PostalPro website to your legal department for review, prior to completing the process. Please be advised the license agreement <u>SHALL NOT</u> be alter, modified, amended, etc.

Upon USPS determining that Applicant has successfully completed Steps 1 – 3, USPS will forward a standard NCOA^{Link} License Agreement ("License Agreement") for signature. **The NCOA**^{Link} **License Agreement must be signed by an officer who possesses the necessary legal authority to sign on behalf of the company, firm, or organization.** Upon receipt of the original signed standard NCOA^{Link} License Agreement, the USPS Contracting Officer's Representative will execute the license agreement and a copy of the executed license agreement will be mailed to the NCOA^{Link} Licensee via Priority Mail[®]. An invoice reflecting the pro-rated license fee will be mailed separately.

Payment must be received within ten (10) calendar days from receipt of the executed license agreement. Once payment is received, USPS will grant electronic access to the NCOA^{Link} datasets and begin NCOA^{Link} production fulfillment weekly.

NOTE: Applicants that elect to develop their own NCOA^{Link} software and/or obtain multiple licenses for commercial use (processing, sell and/or distribution) may complete Steps 2 and 3 simultaneously.

Step 1 NCOA^{Link®} Full and Limited Service Provider Application

Company Name:				
Company Address:				
City:		S	tate:	ZIP+4
North American Ind	lustry Classifi	cation Sy	stem (NAICS):	
Telephone No.:			Fax No.:	
Parent Company (if	applicable):			
Contact Name:				
E-mail Address:				
Service Level:	☐ Full Ser	vice [Limited Service	
ANK ^{Link} Option:	YES	□NO (Applicable to Limited	d Service Provider level only)
•	_			-,
Site Identification:	☐ Primary	Site [Secondary Site	
For Secondary Site	Applications	:		
Provide Primary Sit	e Authorizati	on Code:		

Terms and Conditions of Application for License

- 1. The United States Postal Service NCOA^{Link} Product may only be used by Applicant or Applicant's customers to update existing mailing lists that are used to prepare mail for the purpose of acceptance and delivery by the United States Postal Service.
- 2. Prior to consideration for an NCOA^{Link} License, Applicant must demonstrate its capability of mailing list preparation to the sole satisfaction of the USPS. **The Applicant must submit the Self-Certification Statement, along with this application** to enable USPS to make this determination. This information should include a description of the applicant's business and mailing-related functions and its experience in this field. Refer to the page titled "Self-Certification Statement" for the minimum specific information that must be provided.
- 3. Prior to consideration as an NCOA^{Link} Licensee, a potential Licensee must demonstrate that the software system to be used has obtained USPS certification.
- 4. No NCOA^{Link} License will be granted to the applicant prior to USPS acceptance testing and approval of the applicant's specific NCOA^{Link} software.
- 5. Applicant is in good standing under all existing license agreements with USPS, if any, and has received no notice of warning, suspension or termination from USPS relating either to a current or expired USPS license agreement.
- 6. Applicant shall submit written notice to USPS of any material change to the information submitted as part of the application and supporting documents within thirty (30) days of the occurrence of such change.

Please Print:

I hereby affirm that I have read and fully understand the terms and conditions listed above. I, my company, and/or firm agree to meet these terms and conditions as a prerequisite to applying for or obtaining a USPS NCOA^{Link} Full or Limited Service License Agreement. I affirm that I am an officer of the company, firm or organization and that I possess all necessary legal authority to sign on behalf of the company, firm, or organization. The materials submitted to USPS are true and complete to the best of my knowledge and belief. I understand that submission of false, fictitious or fraudulent statements or representations may be grounds for USPS terminating or suspending any License Agreement and may be punishable by fine or imprisonment (U.S. Code, Title 18, Section 1001).

Company Name:	
Name (please print):	
Signature:	
Title:	
Date:	

Step 1 NCOA^{Link®} Full and Limited Service Provider Confidentiality Statement

All material supplied in connection with the application for and use of NCOA^{Link} Product contains trade secrets and/or confidential technical, commercial, or other information not generally available to the public. This document, and all other material provided in connection with NCOA^{Link} technology and the data and information contained therein shall not be used, duplicated or disclosed to third parties, in whole or in part, for any purpose, without the prior express written consent of the United States Postal Service.

I hereby affirm that I have read and fully understand the terms and conditions listed above. I, my company, and/or firm agree to meet these terms and conditions as a prerequisite to using the NCOA^{Link} Product. I, my company, and/or firm further agree to continue to abide by this Confidentiality Statement whether or not the USPS awards an NCOA^{Link} License to me, my company, and/or firm. This Confidentiality Statement shall not be superseded by the award or entry into of an NCOA^{Link} License or any other agreement with the United States Postal Service, unless such agreement specifically refers to this Confidentiality Statement. I affirm that I am an officer of the company, firm or organization and that I possess all necessary legal authority to sign on behalf of the company, firm, or organization.

Product Name:	NCOA ^{Link}	® Product		
Company Name (please print):			
Name (please pri	nt):			
Title:				
Signature:			Date:	

Please sign and return to:
NCOA^{Link} LICENSING DEPARTMENT
NATIONAL CUSTOMER SUPPORT CENTER
UNITED STATES POSTAL SERVICE
225 N HUMPHREYS BLVD STE 501
MEMPHIS TN 38188-1001

FAX: 650-577-5773

Step 1 NCOA^{Link®} Service Bureau Self-Certification Statements

The following provides clarification and specifics for Item 2 of the Application. This must be provided for evaluation along with the Application.

- 1. A narrative describing the nature of the applicant's business, with emphasis on its mailingrelated functions and experience in this business. Include number of customers, number of files processed and approximate size, frequency of processing, and class of mailings.
- 2. A description of how the applicant plans to utilize NCOA^{Link} technology as part of its business or service offering.
- 3. Key Personnel list (attached)
- Centralized distribution email address (refer to Section 8.11 in the Full Service Licensee Performance Requirements and Section 7.11 in the Limited Service Provider Licensee Performance Requirements)
- Complete the Electronic Product Fulfillment Web Access Request Form (PS Form 5116) to retrieve NCOA^{Link} Daily Delete files and weekly product updates; the form is located at: https://postalpro.usps.com/EPF001.
- 6. Complete the attached Security Documentation

After review of the provided information, the USPS will notify the applicant in writing of the acceptance or rejection of its license application.

Step 1 NCOA^{Link®} Full and Limited Service Provider Key Personnel

ICENSING CONTACT: (Primary Company Name:		_			
Address:					
City:	State:			ZIP+4:	_
Phone: () -	Ext:		FAX: (ZII 14. \	_
Primary Contact:	LXI.		_ 1700(,	
Phone: () -		Email:			
Alternate Contact 1:					
Phone: () -		Email:			
Alternate Contact 2:					
Phone: () -		Email:			
ITE CONTACT: (Primary contact	cts for operational issue	es)			
Company Name:					
Address:	<u> </u>			710.4	
City:	State:			ZIP+4:	<u>-</u>
Phone: () -	Ext:		_ FAX: <u>(</u>)	-
Primary Contact:					
Phone: () -		Email:			
Alternate Contact 1:					
Phone: () -		Email:			
Alternate Contact 2:					
Phone: () -		Email:			
ULFILLMENT CONTACT: (Prim	ary contacts for produc	t fulfillment)			
	a. , comacio foi produc				
Company Name:					
Address:					
City:	State:			ZIP+4:	-
Phone: () -	Ext:		FAX: ()	-
Primary Contact:					
Phone: () -		Email:			
,					
Alternate Contact 1:					
		Email:			
Alternate Contact 1:		Email:			

Step 1 NCOA^{Link®} Full and Limited Service Provider Key Personnel

State ZIP+4: - Phone	Company Name:			
Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Phone: () - Ext: FAX: () - Phone: () - Ext: FAX: () - Phone: () - Ext: FAX: () - Phone: () - Email: Phone: () - Email:	Address:			
Primary Contact: Phone: () - Email: Atternate Contact 1: Phone: () - Email: Atternate Contact 2: Phone: () - Email: ARKETING CONTACT: (Information to be posted on USPS PostalPro Website YES NO) Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Atternate Contact 1: Phone: () - Email: Atternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	City:	State:	ZIF	P+4: -
Phone: () -	Phone: () -	Ext:	FAX: () -
Atternate Contact 1: Phone: (Primary Contact:			
Phone: () - Email: Alternate Contact 2: Phone: () - Email: ARKETING CONTACT: (Information to be posted on USPS PostalPro Website YES NO) Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Company Web site: Company Web site: Customer Service Email:	Phone: () -	Ema	il:	
ARKETING CONTACT: (Information to be posted on USPS PostalPro Website YES NO) Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Crimary Contact: Chone: () - Email: Alternate Contact 1: Chone: () - Email: Company Web site: Company Web site: Customer Service Email:	Alternate Contact 1:		-	
Phone: () - Email: ARKETING CONTACT: (Information to be posted on USPS PostalPro Website YES NO) Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Company Web site: Customer Service Email:	Phone: () -	Ema	ıil:	
ARKETING CONTACT: (Information to be posted on USPS PostalPro Website YES NO) Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Company Web site: Customer Service Email:	Alternate Contact 2:		-	
Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Company Web site: Customer Service Email:	Phone: () -	Ema	ıil:	
Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	ARKETING CONTACT: (Information	ation to be posted on USPS	S PostalPro Website	☐ YES ☐ NO)
Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	Company Name:			
State: ZIP+4: -	Address:			
Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email: Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	City:	State:	ZII	P+4: -
Phone: () - Email: Alternate Contact 1: Phone: () - Email: Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	Phone: () -) -
Alternate Contact 1: Phone: () - Email: Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	Primary Contact:			
Phone: () - Email: Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	Phone: () -	Ema	ıil:	
Alternate Contact 2: Phone: () - Email: Company Web site: Customer Service Email:	Alternate Contact 1:			
Phone: () - Email: Company Web site: Customer Service Email:	Phone: () -	Ema	il:	
Company Web site: Customer Service Email:	Alternate Contact 2:			
Customer Service Email:	Phone: () -	Ema	uil:	
	Company Web site:			
Customer Service Phone:				
	Customer Service Phone:			
	ILLING CONTACT: (Primary co	ntacts for billing issues)		
LLING CONTACT: (Primary contacts for billing issues)				
	Company Name:			
Company Name:	Company Name:			
Company Name: Address:	Address:	State:	ZII	P+4: -
Company Name: Address: City: State: ZIP+4: -	Address:			P+4:
Company Name: Address: Dity: State: ZIP+4: - Phone: () - Ext: FAX: () -	Address: City: Phone: () -			P+4:
Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: FAX: () - -	Address: City: Phone: () - Primary Contact:	Ext:	FAX: (P+4:) -
Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email:	Address: City: Phone: () - Primary Contact: Phone: () -	Ext:	FAX: (P+4: -) -
Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1:	Address: City: Phone: () - Primary Contact: Phone: () - Alternate Contact 1:	Ext:Ema	FAX: (P+4: -) -
Company Name: Address: City: State: ZIP+4: - Phone: () - Ext: FAX: () - Primary Contact: Phone: () - Email: Alternate Contact 1: Phone: () - Email:	Address: City: Phone: () - Primary Contact: Phone: () - Alternate Contact 1:	Ext:Ema	FAX: (P+4: -) -

Step 1 NCOA^{Link®} Full and Limited Service Provider Security Documentation

Provide a description of the specific measures taken to secure the physical and electronic environments in which the NCOA^{Link} system will reside. A diagram and/or flowchart describing the specific measures may be provided. (Attach separate documents if necessary.)

Applicable to Full Service Providers only:

The name(s) and address (es) of all parent, subsidiary and/or affiliate companies or entities ("related entities"), together with the following for each: (a) state of incorporation or registration, and (b) principal place of business

Provide a list of all internal files/lists/databases and those of related entities which will be processed through licensee applicant's NCOA^{Link} system. Identify relational databases in this list.

Step 3

NCOA^{Link®} Full and Limited Service Provider Software Product Information

Hardv	vare and software used to interface	with the N	COA ^{Link} da	ta:			
Comp	any Name & License Number	:					
Comp	pany's NCOA ^{Link} Product Name	:					
Platfo	rm or Operating System	:					
NCO	A ^{Link} Software Vendor	:					
NCO	A ^{Link} Software Product Name	:					
NCO	A ^{Link} Software Product Version	:					
Is Sof	tware Hardware Dependent?	:					
Addre	ess Matching ZIP + 4 Product Name	e:					
Addre	ess Matching ZIP + 4 Product Versi	on:					
Addre	ess Matching ZIP + 4 System: PLEA	SE CHEC	K ONE:				
th in C m	pen System – Defined as having that will affect the applications ZIP + dependently obtain CASS certificated losed System – Defined as NOT has anner that will affect the application losed System will not be required to	4 matching ion for the aving the all as ZIP + 4	decisions system. bility to mod matching so	Licensees dify, adjust, election or	s using an or tweak decisions.	Open System m the application in Licensees using	ust n a
D	PV [®] Product Name:						
D	PV Product Version:						
L	ACS ^{Link®} Software Product Name:						
L	ACS ^{Link} Software Product Version:						
☐ In Si	A ^{Link} Software options: tegrated – Address Matching and Nandalone – Address Matching and NK ^{Link} Enhancement (applicable to ASH	NCOA ^{Link} : Limited \$	software ar	e separate	software p	gle software pack backages.	каде.
☐ Fu	ce Level Option: ull Service Provider mited Service Provider						

NOTE: Checklists for all supporting documents will be available at time of testing. The USPS shall not be obligated to pay any costs incurred in preparing any technical proposal, software development costs, or testing costs regardless of whether or not the USPS awards an NCOA License to the applicant.

Note: Please mark any item as N/A if it is not applicable.

Step 4

NCOA^{Link®} Full and Limited Service Provider Execution of License

NOTE: We recommend submitting a copy of the License Agreement located on our PostalPro website to your legal department for review, prior to completing the process. Please be advised the license agreement <u>SHALL NOT</u> be altered, modified, amended, etc.

Upon USPS determining that Applicant has successfully completed Steps 1-3, USPS will forward an approval letter, prorated fee chart and a standard NCOA^{Link} License Agreement to Applicant. **The NCOA^{Link} License Agreement must be signed by an officer who possesses all necessary legal authority to sign on behalf of the company, firm, or organization.** The signed, original agreement and fee payment must then be returned to the USPS at the following address:

NCOA^{Link} LICENSING DEPARTMENT NATIONAL CUSTOMER SUPPORT CENTER UNITED STATES POSTAL SERVICE 225 N HUMPHREYS BLVD STE 501 MEMPHIS TN 38188-1001 FAX: 650-577-5773

Upon USPS review and approval of the signed License Agreement and receipt of the license fee, USPS shall execute the License Agreement and return a copy to Applicant.