

## **LACSLink® End User Certification Procedures**

The following describes the process for an Applicant to qualify for a license to utilize the LACSLink data. Information for each step of the certification process is included.

Full requirements are set forth in the USPS LACSLink License Agreement and related documents. In the event of a conflict between this document and the standard LACSLink License Agreement, the terms of the LACSLink License Agreement prevail.

Applicant must submit all materials to USPS at the following address:

LACSLink 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

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

### **Step 2. Execution of License**

Upon successful completion of Step 1 USPS will forward a standard LACSLink End User License Agreement ("License Agreement") for signature. **The LACSLink 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 LACSLink End User 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 LACSLink End User Licensee. The license/data fee invoice (if applicable) will be mailed separately.

Payment must be received within ten (10) calendar days from receipt of the executed license agreement. Once payment is received, LACSLink monthly product fulfillment will be available via the USPS Electronic Product Fulfillment website.

**NOTE:** LACSLink End User Annual License fee waived for NCOALink® Full Service Providers.

**Step 1**  
**LACS<sup>Link</sup>® End User**  
**Application**

**Please Print:**

Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP + 4: \_\_\_\_\_  
North American Industry Classification System (NAICS): \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Parent Company (if applicable): \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**Terms and Conditions of Application for License**

1. 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.
2. Applicant is not eligible to receive a LACS<sup>Link</sup> End User license prior to USPS: (a) completing its acceptance testing of the software, (a) determining, in its sole discretion, that the testing is successful, and (c) certifying the Applicant's specific LACS<sup>Link</sup> software, if applicable.
3. USPS is not liable for any and all costs incurred by the Applicant, its affiliates, agents or employees for the submission of this Application and related materials.
4. The United States Postal Service LACS<sup>Link</sup> data may only be used by Applicant to update addresses and mailing lists and/or to provide list processing services that are used to prepare mail for the purpose of acceptance and delivery by the United States Postal Service.
5. USPS may elect not to award Applicant a LACS<sup>Link</sup> End User license agreement in the event that USPS determines Applicant has violated any of the terms and conditions set forth above.
6. Prior to consideration for a LACS<sup>Link</sup> License, Applicant must demonstrate its capability of mailing list preparation to sole satisfaction of the USPS. **The Applicant will 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.
7. 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.

**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 LACS<sup>Link</sup> End User 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 (US Code, Title 18, Section 1001.)**

Applicant Name: \_\_\_\_\_

By: \_\_\_\_\_(Signature)

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Step 1**  
**LACS<sup>Link</sup>® End User**  
**Confidentiality Statement**

All material supplied in connection with the application for and use of LACS<sup>Link</sup> 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 LACS<sup>Link</sup> 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<sup>®</sup>.

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 LACS<sup>Link</sup> Product. I, my company, and/or firm further agree to continue to abide by this Confidentiality Statement whether or not the USPS awards a LACS<sup>Link</sup> License to me, my company, and/or firm. This Confidentiality Statement shall not be superseded by the award or entry into a LACS<sup>Link</sup> 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:           **LACS<sup>Link</sup>® Product**          

Company Name (please print): \_\_\_\_\_

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please sign and return to:  
LACS<sup>Link</sup> CERTIFICATION 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**  
**LACS<sup>Link</sup>® End User**  
**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 mailing-related functions and experience in this business.
2. A description of how the applicant plans to utilize LACS<sup>Link</sup> technology as part of its business or service offering.
3. Key Personnel list (attached)
4. Software Product Information
5. Please provide a narrative on how the LACS<sup>Link</sup> technology will be secure. A diagram and/or flowchart describing the specific measures may be provided. (Attach separate documents if necessary.)

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**  
**LACSLink® End User**  
**Software Product Information**

Please complete the below information with hardware and software used to interface with the LACSLink data.

Company Name & License Number : \_\_\_\_\_

Platform or Operating System : \_\_\_\_\_

LACSLink Software Vendor : \_\_\_\_\_

LACSLink Software Product Name : \_\_\_\_\_

LACSLink Software Product Version : \_\_\_\_\_

Is Software Hardware Dependent? : \_\_\_\_\_

Address Matching ZIP + 4® Product Name \_\_\_\_\_

Address Matching ZIP + 4 Product Version: \_\_\_\_\_

Address Matching ZIP + 4 System: **PLEASE CHECK ONE:**

- Open System – Defined as having the ability to modify, adjust, or tweak the application in a manner that will affect the applications ZIP + 4 matching decisions. Licensees using an Open System must independently obtain CASS certification for the system.
- Closed System – Defined as **NOT** having the ability to modify, adjust, or tweak the application in a manner that will affect the applications ZIP + 4 matching selection or decisions. Licensees using a Closed System will not be required to obtain separate CASS certification for the system.

DPV Product Name: \_\_\_\_\_

DPV Product Version: \_\_\_\_\_

NCOALink Software Vendor: \_\_\_\_\_

NCOALink Software Product Name: \_\_\_\_\_

NCOALink Software Product Version: \_\_\_\_\_

**LACSLink Software options:**

- Integrated – Address Matching and NCOALink software are integrated into a single software package.
- Standalone – Address Matching and NCOALink software are separate software packages.

**Note: 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 a LACSLink License to the applicant.**

**Step 1**  
**LACS<sup>Link</sup>® End User Key Personnel**

**LICENSING CONTACT: (Primary contacts for licensing issues)**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP + 4: \_\_\_\_\_ -  
Phone: ( ) - \_\_\_\_\_ Ext: \_\_\_\_\_ FAX: ( ) - \_\_\_\_\_  
Primary Contact: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_  
Alternate Contact 1: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_  
Alternate Contact 2: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

**SITE CONTACT: (Primary contacts for operational issues)**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP + 4: \_\_\_\_\_ -  
Phone: ( ) - \_\_\_\_\_ Ext: \_\_\_\_\_ FAX: ( ) - \_\_\_\_\_  
Primary Contact: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_  
Alternate Contact 1: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_  
Alternate Contact 2: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

**FULFILLMENT CONTACT: (Primary contacts for product fulfillment)**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP + 4: \_\_\_\_\_ -  
Phone: ( ) - \_\_\_\_\_ Ext: \_\_\_\_\_ FAX: ( ) - \_\_\_\_\_  
Primary Contact: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_  
Alternate Contact 1: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_  
Alternate Contact 2: \_\_\_\_\_  
Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

**Step 1**  
**LACSLink® End User Key Personnel**

**TECHNICAL CONTACT: (Primary contacts for technical issues)**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP + 4: \_\_\_\_\_ -  
Phone: ( ) - Ext: \_\_\_\_\_ FAX: ( ) -  
Primary Contact: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_  
Alternate Contact 1: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_  
Alternate Contact 2: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_

**MARKETING 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: \_\_\_\_\_  
Alternate Contact 2: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_  
Company Web site: \_\_\_\_\_  
Customer Service Email: \_\_\_\_\_  
Customer Service Phone: \_\_\_\_\_

**BILLING CONTACT: (Primary contacts for billing issues)**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP + 4: \_\_\_\_\_ -  
Phone: ( ) - Ext: \_\_\_\_\_ FAX: ( ) -  
Primary Contact: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_  
Alternate Contact 1: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_  
Alternate Contact 2: \_\_\_\_\_  
Phone: ( ) - Email: \_\_\_\_\_



**Step 2**  
**LACS<sup>Link</sup>® End User**  
**Execution of License**

Upon USPS determining that Applicant has successfully completed Step 1, USPS will forward an approval letter, a prorated fee chart and a standard LACS<sup>Link</sup> End User License Agreement to Applicant. **The LACS<sup>Link</sup> 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:

**LACS<sup>Link</sup> CERTIFICATION 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.