

Presort Check List

Client

Job Number

Contact

Phone

1

Presort Class

- 1st Class Periodicals*
 Standard BPM (Package Services)

* Additional information on page 3

Presort Schemes

(Choose all that apply)

- CRRT Auto Automation
 CRRT Non-Auto 3/5 and Basic
 Walk-Sequence/High Density
 Ascending/Descending

Presort Options

(Choose all that apply)

- Palletization
 Mail.dat File (Version _____)
 Intelligent Mail Barcode*

* Additional information on page 3

Automation Compatibility

- Yes, mail piece is automation compatible
 No, mail piece is machinable
 No, mail piece is Irregular

Mail Piece Category

- Letter NFM
 Flat Parcel
 Postcard CMM
 Double Postcard

Rate Category

- Regular
 Non-Profit

Postage Payment Method

(Please provide additional permit info if different than mailer info.)

- Permit # _____
 Meter
 Stamps: Rate _____

2

Mail Piece Specifications

Sample Size _____
(Number of pieces used for weight/thickness measurements)

Weight _____ (ozs./lbs.)

Thickness _____ (in.)

Height _____ (in.)

Width _____ (in.)

Entry Point Type

- SCF Other
 BMC Multiple*
 DDU

* If multiple entry points are to be defined, please attach a list of all entry points, the zip codes served, the entry point type, and the sequence that you would like them to be numbered. Also indicate the minimum number of pieces/weight that should be used to qualify mail to enter at each location.

Default Entry Point

_____ city

_____ state _____ zip

Entry Point Minimum Pieces

Default is 200 pieces or 50 lbs. of mail.

Min Pieces _____

Min Weight _____ (ozs./lbs.)

Mailing Facility Information

Name _____

(Appears on sack/tray tags)

Company _____

Contact _____

Address _____

_____ city

_____ state

_____ zip

Mail Date _____

Phone _____ Fax _____

Please fax the form to customer service at (608) 796-0657
 or email to listcleanup-customerservice@authenticom.com

3 Output Contact Information

Contact _____
 Company _____
 Address _____
city _____
state _____ zip _____
 Phone _____ Fax _____

Output Format

- Dbase III
- Fixed ASCII
- Delimited Comma Tab
- Inkjet File*
- Other _____

* If you would like us to create an inkjet file, please complete the INKJET CHECK LIST below.

Output Media

- FTP Internet Site DVD
- Email Other _____
- CD

Reports/Tags

We will send you a PDF file of the Presort Report and a PDF file of the sack/tray tags via email or ftp.

Do you need us to also print and ship these files?

- Yes No

Inkjet Check List

Inkjet Type* _____

* Please check to make sure we can create an inkjet file in the format you require.

Address Block Sample

Draw a sample of the address block including placement of the endorsement line, barcode, keycode, etc.

Line 1
Line 2
Line 3
Line 4
Line 5
Line 6
Line 7
Line 8

4 Label Specifications

Label _____
 Width _____ characters
 Height _____ lines

Casing

- All UPPERCASE
- Upper/Lower

Print Endorsement

- Yes
- No
- Carrier Route Only

Print Barcode

- Yes
- No

Barcode Placement

- Top
- Bottom

Print Break Marks

- Yes First Last Both
- No

Print Keycode

- Yes (Field _____)
- No

Print Message

- Yes
- No

Message Casing

- UPPERCASE Upper/Lower

Create the message exactly as it should appear on the mail piece.

Line 1
Line 2
Line 3
Line 4

5 Intelligent Mail Barcode (IMB) Information

Click below to view IMB Types
[Download IMB Service Types Doc.](#)
Or copy and paste url into your browser
https://www.listcleanup.com/docs/imb_service_types.pdf

Piece Barcode

IMB Mailer ID _____ (6 or 9 Digits)
IMB Serial Number Start _____
IMB Serial Number Max. _____
IMB Service Type _____ (3 Digit Code)

Automation Barcode Type

- Full
- Basic
- Other (POSTNET) _____

Pallet Barcode

IMB Pallet Mailer ID _____
IMB Pallet Serial Number Start _____

Barcode Output Type

- 31 Digit number IMB
- 65 Character encoded IMB

Tray/Sack Barcode

IMB Tray/Sack Mailer ID _____
IMB Tray/Sack Serial Number Start _____

6 Periodicals Information

PER Advertising Percentage _____
PER Publication Name _____
PER Publication No. _____
PER Edition Code _____
PER Issue Date _____
PER Frequency of Issue _____
PER Publisher Name _____
PER Publisher Phone No. _____

PER Subscriber Option

- Assume ALL *(All records assigned to this version assumed to be Subscribers)*
- Assume NONE *(All records assigned to this version assumed to be Non-Subscribers)*
- Count UNDER *(All Non-Subscriber records assigned to this version assumed to be UNDER the 10% limit)*
- Count OVER *(All Non-Subscriber records assigned to this version assumed to be OVER the 10% limit)*