

Plant-Verified Drop Shipment (PVDS) CONSOLIDATED Verification and Clearance

1. Requested In-home Delivery Date (3-day window)

2. Drop Ship Appointment Number

MAILER: This form is for use by an individual mailer only, for multiple PVDS mailings cleared at origin on the same day for entry at a single destination on the same vehicle.

3. Mailer Name		4. FAST Scheduler ID			9. Destination Entry Discounts Claimed (Check all that apply)					
5. Mailer Contact Name		6. Mailer Contact Telephone (Include area code)			<input type="checkbox"/> DDU <input type="checkbox"/> DNDC <input type="checkbox"/> Mailing includes pieces for delivery outside service area of entry facility <input type="checkbox"/> International Service Center (ISC)					
7. Origin Plant Location (City, state, and ZIP+4®)					10. Individual Mailings Key (Used below to describe individual mailings)					
8. Contact and Telephone at Company Making Drop Ship Appointment (If other than mailer and if known when completing this form)					Payment Type (12b) P Permit Imprint M Meter S Precanceled Stamps					
					No. of Pallets & Type(13a): PK Pallets with Bundles PS Pallets with Sacks PT Pallets with Trays PP Pallets and Parcels					
					No. of Non-Palletized Containers & Type (13b): S Sacks T Trays P Parcels B Bedloaded Bundles AB Air Boxes O Other					
					Processing Category (15b): L Letters F Flats A Automation Compatible I Irregular Parcels M Machinable Parcels N Nonmachinable Parcels					
11a. Permit Holder	11b. Product Name/ID	12a. Postage Statement Sequence No.	12b. Permit No. & Payment Type (Except PER)	13a. No. Pallets & Type	13b. Number of Non-Palletized Containers & Type	14a. Number of Pieces	14b. Piece Weight	14c. Total Gross Weight (Verified at origin office)	15a. Class of Mail	15b. Processing Category
Totals										

16. Comments -- Record SCF/ADC/NDC/ASF designator(s) and ZIP Code(s) for which mail is destined or attach register.

17. Origin Post Office™ (City, state, and ZIP+4)		26a. Name of USPS® Employee Verifying Mail		26b. Employee's Telephone Number (Include area code)
18. Verification Location <input type="checkbox"/> DMU (Mailer's plant) <input type="checkbox"/> BMEU or Post Office		26c. Signature of Verifying Employee		27. Round Stamp (Required)
19. Permit Number	20. Postage Payment Method (Except for Periodicals) <input type="checkbox"/> Permit <input type="checkbox"/> Stamped <input type="checkbox"/> Meter	26d. USPS Contact Name (if other than verifying employee)		
21. Total Pieces	22. Total Weight of Mailing			
23. Vehicle PVDS Seal Number	24. Vehicle ID Number			
25. Comments				

28. Entry Office (Facility name, address, city, state and ZIP+4 code as found in the Drop Ship Product)		33. Load Condition Irregularities (Check all that apply)		
Note: Shipments with 100% Periodicals can be presented whenever the destination facility is open and staffed to accept shipments.		<input type="checkbox"/> Broken Pallets <input type="checkbox"/> Mailings are not separated by PS Form 8125-C <input type="checkbox"/> Container Counts do not match PS Form 8125-C <input type="checkbox"/> Overweight Pallets <input type="checkbox"/> Damaged Mail <input type="checkbox"/> Pallets Too Tall <input type="checkbox"/> Improper Mail Makeup <input type="checkbox"/> Incorrect Mail Class <input type="checkbox"/> Load Unsafe <input type="checkbox"/> Other (Describe in Item 32) <input type="checkbox"/> Incorrect Appointment Type		
29a. USPS Receiving Employee Signature	29b. USPS Receiving Employee Name	34. Scan the barcode upon receipt.		
30. Date/Time of Arrival	31. Date/Time of Departure			
32. Comments (NOTE: Enter bedload discrepancies as percentages and pallet discrepancies as pallet counts.)				