

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

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) <input type="checkbox"/> DDU <input type="checkbox"/> DSCF <input type="checkbox"/> Parcel Select®																	
5. Mailer Contact Name						6. Mailer Contact Telephone (Include area code)		<input type="checkbox"/> Mailing includes pieces for delivery outside service area of entry facility <input type="checkbox"/> International Service Center (ISC) <input type="checkbox"/> International																	
7. Origin Plant Location (City, state, and ZIP+4®)						10. Individual Mailings Key (Used below to describe individual mailings) 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 AB Air Boxes O Other Processing Category (15b): L Letters F Flats A Automation Compatible I Nonstandard Parcels M Machinable Parcels																			
8. Contact and Telephone at Company Making Drop Ship Appointment (If other than mailer and if known when completing this form)																									
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 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) Note: Shipments with 100% Periodicals can be presented whenever the destination facility is open and staffed to accept shipments.													33. Load Condition Irregularities (Check all that apply) <input type="checkbox"/> Broken Pallets <input type="checkbox"/> Container Counts do not match PS Form 8125-C <input type="checkbox"/> Damaged Mail <input type="checkbox"/> Improper Mail Makeup <input type="checkbox"/> Load Unsafe <input type="checkbox"/> Incorrect Appointment Type <input type="checkbox"/> Mailings are not separated by PS Form 8125-C <input type="checkbox"/> Overweight Pallets <input type="checkbox"/> Pallets Too Tall <input type="checkbox"/> Incorrect Mail Class <input type="checkbox"/> Other (Describe in Item 32)												
29a. USPS Receiving Employee Signature						29b. USPS Receiving Employee Name																			
30. Date/Time of Arrival						31. Date/Time of Departure																			
32. Comments (NOTE: Enter bedload discrepancies as percentages and pallet discrepancies as pallet counts.)																									