

# SALES & SERVICES ASSOCIATE ACADEMY

Module 6:  
Solutions - Part Three



# Additional Services

USPS participates in public service and government programs:

- Accept passport applications.
- Sell bird stamps.
- Provide Selective Service Registration forms.
- Change-of-Address orders (online or at Post Office).
- Premium Forwarding Service<sup>®</sup>.
- Temporary Forwarding Service.
- Hold Mail Service.





# Passport Applications

- Accepted in designated Post Offices.
- USPS has authority to accept passport applications.
- U.S. Passport issued to citizens or nationals of U.S.
- Passport bearer entitled to protection and benefits of country when abroad.
- USPS® does not approve or process applications.
- Role is to accept application and validate photo and documentation submitted.
- Passport Acceptance training provided.

**APPLICATION FOR A U.S. PASSPORT**  
Please Print Legibly Using Black Ink Only

OMB CONTROL NO. 1405-0004  
OMB EXPIRATION DATE: 05-31-2019  
ESTIMATED BURDEN: 35 MIN.

Attention: Read WARNING on page 1 of instructions  
Please select the document(s) for which you are applying:  
 U.S. Passport Book  U.S. Passport Card  Both  
The U.S. passport card is not valid for international air travel. For more information see page 1 of instructions.  
 Regular Book (Standard)  Large Book (Non-Standard)  
Note: The large book option is for those who frequently travel abroad during the passport validity period, and is recommended for applicants who have previously required the addition of visa pages.

1. Name Last  D  O  Dep DOTS  
First Middle End # Exp.  
2. Date of Birth (mm/dd/yyyy) 3. Sex M F 4. Place of Birth (City & State if in the U.S., or City & Country as it is presently known.)  
5. Social Security Number 6. Email (Info alerts offered at [travel.state.gov](http://travel.state.gov)) 7. Primary Contact Phone Number

8. Mailing Address: Line 1: Street/RFD#, P.O. Box, or URB.  
Address Line 2: Clearly label Apartment, Company, Suite, Unit, Building, Floor, In Care Of or Attention if applicable. (e.g., In Care Of - Jane Doe, Apt # 100)  
City State Zip Code Country, if outside the United States

9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed)  
A. B.

**STOP! CONTINUE TO PAGE 2**  
DO NOT SIGN APPLICATION UNTIL REQUESTED TO DO SO BY AUTHORIZED AGENT

Identifying Documents - Applicant or Mother/Father/Parent on Second Signature Line (if identifying minor)  
 Driver's License  State issued ID Card  Passport  Military  Other  
Name Issue Date (mm/dd/yyyy) Exp. Date (mm/dd/yyyy) State of Issuance  
ID No. Country of Issuance

Identifying Documents - Applicant or Mother/Father/Parent on Third Signature Line (if identifying minor)  
 Driver's License  State issued ID Card  Passport  Military  Other  
Name Issue Date (mm/dd/yyyy) Exp. Date (mm/dd/yyyy) State of Issuance  
ID No. Country of Issuance

Acceptance Agent  (Vice) Consul USA  
 Passport Staff Agent

Attach a color photograph taken within the last six months

(Seal)

Name of courier company (if applicable) Facility ID Number  
Facility Name/Location Agent ID Number  
Signature of person authorized to accept applications Date

Applicant's Legal Signature - age 16 and older  
Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)  
Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)

For Issuing Office Only → Blk Card EF Postage Execution Other  
DS-11 06-2016 \* DS 11 C 09 2013 1 \* Page 1 of 2

# Duck Stamps

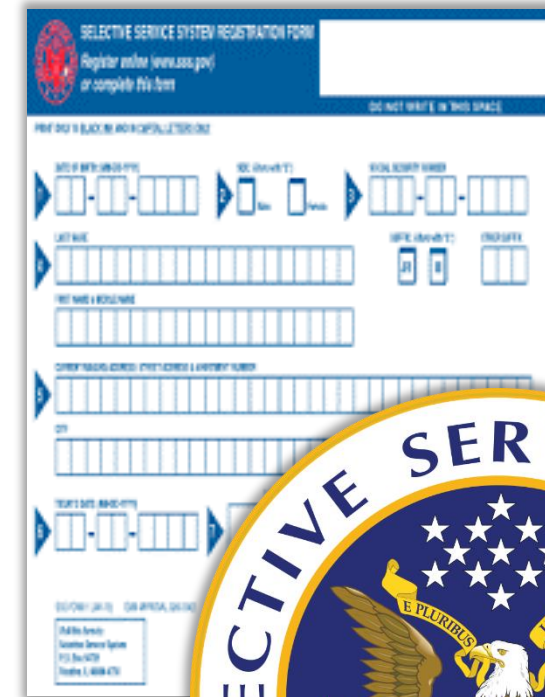
- Migratory Bird Hunting and Conservation Stamps required by federal law to hunt migratory birds (ducks, geese).
- Convenient purchase location.
- Not used as postage, nonredeemable, all sales are final.
- Highly collectible stamps.
- New stamp issued annually, only for sale from July 1 through March 1.
- Unsold duck stamps should be returned to their unit reserve stock.



# Selective Service

Selective Service registration:

- Names and addresses of men aged 18-25.
- Used in national emergency when expansion of Armed Forces is required.
- Individuals complete and mail forms without USPS® assistance.



SELECTIVE SERVICE SYSTEM REGISTRATION FORM  
Register online ([www.sss.gov](http://www.sss.gov))  
or complete this form

DO NOT WRITE IN THIS SPACE

PRINT OR TYPE IN BLOCK LETTERS AND CAPITAL LETTERS

DATE OF BIRTH (MM-DD-YY)    SEX (M/F/T)    SOCIAL SECURITY NUMBER

LAST NAME    HOME PHONE (AREA CODE)    HOME PHONE NUMBER

FIRST NAME & MIDDLE NAME

CURRENT ADDRESS (STREET ADDRESS & APARTMENT NUMBER)  
CITY

TELEPHONE (AREA CODE)    TELEPHONE NUMBER

SELECTIVE SERVICE (SEE OFFICIAL INSTRUCTIONS)

Mail to: Selective Service System, P.O. Box 4570, Wash DC 20045-0470



# Burial Flags

- American flag presented at Veterans funerals gifted to the family.
- Department of Veterans Affairs issues burial flags when requested.
- No time limit for request.
- One flag issued per deceased veteran.





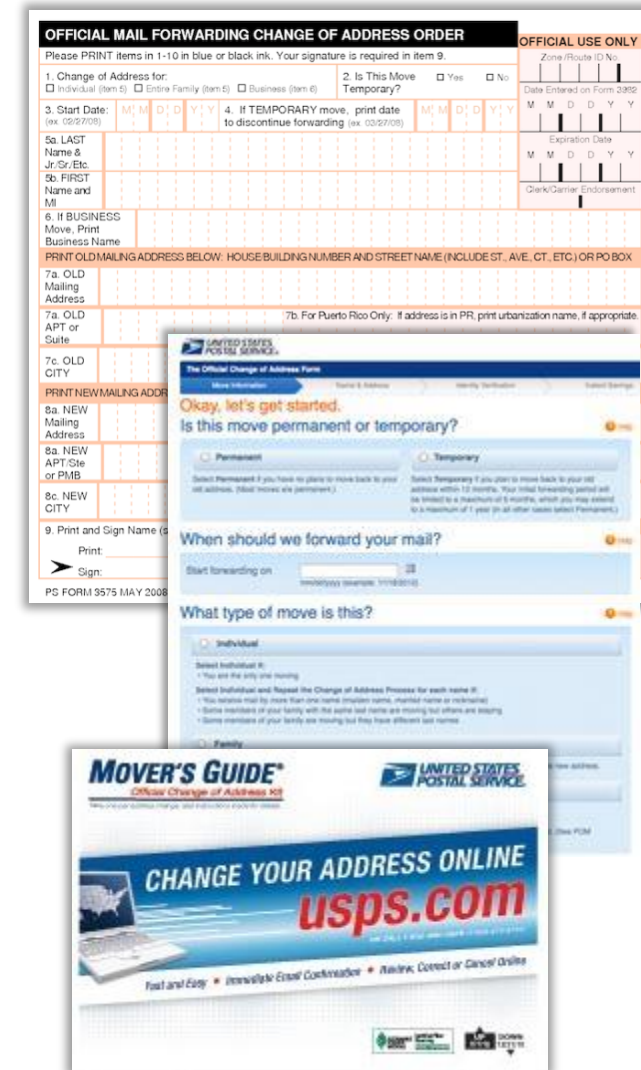
# Change of Address (COA)

- Records of permanent change-of-address orders kept for 18 months.
  - Months 1-12 piece is forwarded.
  - Months 13-18 new address provided mail returned to sender.
- Used for forwarding and address correction.
- Change-of-address order from general delivery to permanent local address, without time limit, kept for six months.
- Change-of-address order to other than a permanent local address kept for 30 days.
- Extended Mail Forwarding available for purchase in 6-, 12-, or 18-month increments.

The image displays two documents related to USPS address changes. The top document is the 'OFFICIAL MAIL FORWARDING CHANGE OF ADDRESS ORDER' form, which includes sections for: 1. Change of Address for (Individual, Entire Family, or Business); 2. Is This Move Temporary? (Yes/No); 3. Start Date; 4. If TEMPORARY move, print date to discontinue forwarding; 5a. LAST Name & Jr./Sr./Etc.; 5b. FIRST Name and MI; 6. If BUSINESS Move, Print Business Name; 7a. OLD Mailing Address; 7b. For Puerto Rico Only; 7c. OLD CITY; 7d. State; 7e. ZIP; 8a. NEW Mailing Address; 8b. For Puerto Rico Only; 8c. NEW CITY; 8d. State; 8e. ZIP; 9. Print and Sign Name; and an 'OFFICIAL USE ONLY' section for Zone/Route ID No., Date Entered on Form 3852, and Expiration Date. The bottom document is a 'MOVER'S GUIDE' promotional flyer for USPS, featuring the text 'CHANGE YOUR ADDRESS ONLINE usps.com' and 'Fast and Easy'.

# COA Submission Options

- Submitted online [www.usps.com](http://www.usps.com)<sup>®</sup>.
- Customer provides email address and valid credit card (MC<sup>®</sup>, VISA<sup>®</sup>, AmEx<sup>®</sup>).
- Billing address must reflect new address.
- Customer may print form, at no cost, and then mail the order.
- Free Official Change of Address Kit, Pub 75 – Mover's Guide kept at counter and provided free.
- Information cards via [www.usps.com](http://www.usps.com) located in lobby displays.





# COA Form Completion

OFFICIAL MAIL FORWARDING CHANGE OF ADDRESS ORDER										OFFICIAL USE ONLY					
Please PRINT items 1-10 in blue or black ink. Your signature is required in item 9.										Zone/Route ID No.					
1. Change of Address for: (Read Attached Instructions) <input checked="" type="checkbox"/> Individual (#5) <input type="checkbox"/> Entire Family (#5) <input type="checkbox"/> Business (#6)					2. Is This Move Temporary? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					Date Entered on Form 3982					
3. Start Date: (ex. 02/27/16)			1 2		1 2		1 9			M M D D Y Y					
3a. LAST Name & Jr./Sr./etc.					J o n e s					Expiration Date					
5b. FIRST Name and MI					J a n					M M D D Y Y					
6. If BUSINESS Move, Print Business Name										Clerk/Carrier Endorsement					
PRINT OLD MAILING ADDRESS BELOW: HOUSE/BUILDING NUMBER AND STREET NAME (INCLUDE ST., AVE., CT., ETC.) OR PO BOX															
7a. OLD Mailing Address			1 2 3 M a i n S t												
7a. OLD APT or Suite			7b. For Puerto Rico Only: If address is in PR, print urbanization name, if appropriate.												
7c. OLD CITY			A n y C i t y				7d. State		S T		7e. ZIP		1 2 3 4 5		
PRINT NEW MAILING ADDRESS BELOW: HOUSE/BUILDING NUMBER AND STREET NAME (INCLUDE ST., AVE., CT., ETC.) OR PO BOX															
8a. NEW Mailing Address			1 2 3 E l m S t												
8a. NEW APT/Ste or PMB			8b. For Puerto Rico Only: If address is in PR, print urbanization name, if appropriate.												
8c. NEW CITY			A n y C i t y				8d. State		S T		8e. ZIP		1 2 3 4 5		
9. Print and Sign Name (see conditions on reverse)										OFFICIAL USE ONLY					
Print: Jan Jones					10. Date Signed:										
Sign: <i>Jan Jones</i>					(ex. 01/27/16)					1 2 0 1 1 8					
PS FORM 3575 JANUARY 2016										Visit <a href="http://usps.com">usps.com</a> to change your address online				0116	

# Temporary Forwarding

- Mail forwarded up to six months, with additional renewal up to six months.
- Begin and end dates must be on COA.
- PS Form 3546, *Official Change/Correction to Mail Forwarding Change of Address Order – Postal Generated Form*, to modify or correct existing COA.
  - Must be completed by SSA.
  - Can be completed at [www.usps.com](http://www.usps.com)®.

United States Postal Service® — **Official Change/Correction to Mail Forwarding Change of Address Order**

1. Check action(s) required to correct COA information:

- Correct Name
- Change to Entire Family
- Change to Individual Only
- Cancel COA Order; Invalid Request
- Cancel COA Order; Resume Delivery
- Correct New Address \*
- Correct Old Address \*
- Change Temporary to Permanent
- Change Permanent to Temporary
- Change Temporary End Date:

2.  Individual  Family  Business

**AFFIX 3982 LABEL ONLY or WRITE NAME & OLD ADDRESS**

Name (Last, First, MI)

Old Address (No., street, apt./ste./PO box no., city, state, ZIP + 4®)

Complete items 3. and 4. below as appropriate for name modifications only:

3. Last Name or Business Name

4. First Name and M.I.

**\* Required completion of OLD address or NEW address information when selected in ITEM ONE.**

**PRINT OLD mailing address below (Number and street name - Include ST, AVE, CT, etc. or PO BOX number)**

5a. OLD Mailing Address

5b. OLD Apt. or Suite No.

5c. For Puerto Rico Only: Print urbanization name, if appropriate.

5d. OLD City Name

5e. State

5f. ZIP

**PRINT NEW mailing address below (Number and street name - Include ST, AVE, CT, etc. or PO BOX number)**

6a. NEW Mailing Address

6b. NEW Apt., Suite No. or PMB

6c. For Puerto Rico Only: Print urbanization name, if appropriate.

6d. NEW City Name

6e. State

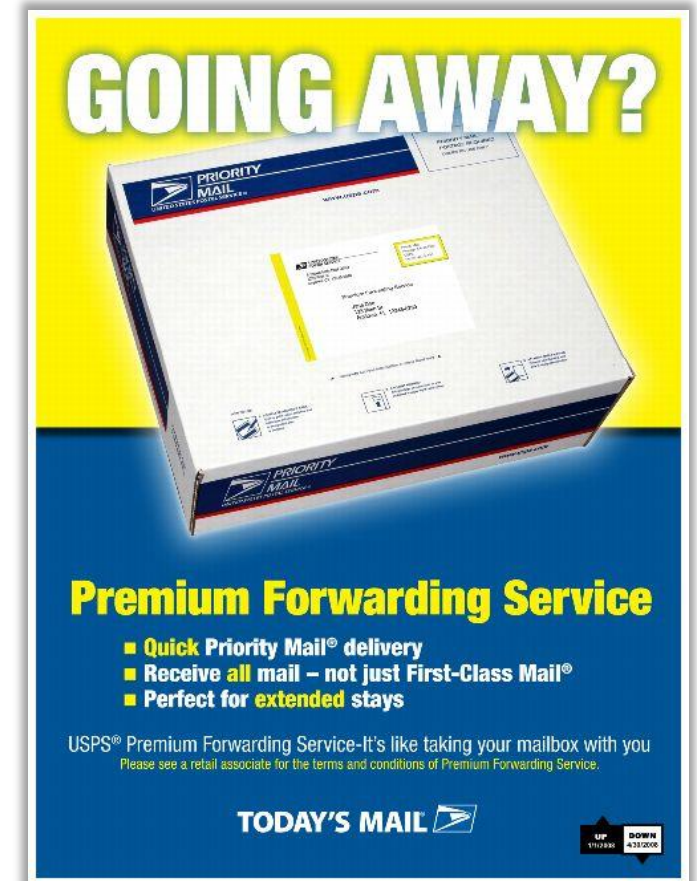
6f. ZIP

Employee Initials Date Route ID Number

PS Form **3546**, May 2007 (7530-01-000-9953)

# Premium Forwarding Service® (PFS)

- Three PFS options:
  - *PFS-Residential*: primary address mail shipped to temporary address.
  - *PFS-Commercial*: business PO Boxes or business street addresses dispatched to a new address.
  - *PFS-Local*: residential/individual and business/organization PO box™ holders mail addressed to PO Box delivered to street address.
- Residential and certain PO Box customers may have all mail reshipped or rerouted to temporary address.
  - Weekly Priority Mail shipment.
  - PFS Fee for service.
- Available for period between two weeks and one year.
- Separate from piece-by-piece forwarding service (COA).




**GOING AWAY?**

**Premium Forwarding Service**

- Quick Priority Mail® delivery
- Receive all mail – not just First-Class Mail®
- Perfect for extended stays

USPS® Premium Forwarding Service-It's like taking your mailbox with you  
Please see a retail associate for the terms and conditions of Premium Forwarding Service.

TODAY'S MAIL 

UP 11/2008 DOWN 4/31/2008



# Authorization to Hold Mail

- Can request up to 14 calendar days in advance via [usps.com](https://usps.com), retail counter, or calling 1-800-ASK-USPS.
- Forms kept 18 months.
- Hold automatically cancelled when mail is picked up  
Delivery resumes next delivery day.
  - Valid photo ID required to pick up mail.
  - Written request may be made authorizing a third party to pick up mail.
- Carrier can deliver on specified date, or customer pick up at end of hold.
- Holds requested in excess of 30 days, suggest free forwarding service.
- Complete PS Form 8076, *Authorization to Hold Mail* (3-30 days).



# Firm Holdout

- Customers who regularly receive 50 letters or more on 1st delivery trip (or news agent or publisher's representative) may pick up mail at PO.
- Complete PS Form 3801, *Standing Delivery Order*, (must include signature of those authorized to pick up mail).
- No fee and may cancel at any time.
- Postmaster must approve.
- May pick up mail where and when specified by Postmaster.
- Postmaster may cancel if mail not retrieved for 10 consecutive days without Hold order, one year wait to restore service if cancelled.

**UNITED STATES POSTAL SERVICE®** **Standing Delivery Order**

Name and Address of Individual or Firm (include apartment or suite number) Date Submitted\*

Signature and title of person authorized to sign this Standing Delivery Order Telephone Number

As the above-named individual or firm, I authorize the agent(s) named below to receive all mail addressed to or in care of the above-named individual or firm, including these services: Adult Signature Required, Certified, Insured, C.O.D., Priority Mail Express®, Signature Confirmation™, and unrestricted Registered Mail™. I understand that this Standing Delivery Order will remain in effect until I cancel it in writing. I assume all responsibility for loss, rifling, or damage of the mail after it is delivered to the agent(s) authorized on this form.

\*USPS will revoke all orders submitted before this date. NOTE: Authorized Agents are required to provide a valid government- or employee-issued photo identification (ID) verifying their identity before we release the mail.

CUSTOMER INSTRUCTIONS				USPS INSTRUCTIONS		
Fill out all non-shaded areas as follows: 1. Add printed name(s) of Authorized Agents. 2. Put a check mark in column that corresponds to the type(s) of Restricted mail (Restricted Delivery, Adult Signature Restricted Delivery) your agent is authorized to pick up. 3. Get agent(s) signature (if available) before you submit this form.				1. At first pick-up: request signature (if missing) and a form of valid government- or employee-issued photo identification (ID). 2. Visually inspect the ID, check the box (if valid), and write in your initials and date. 3. Release the mail to the agent.		
AUTHORIZED AGENT(S) – RESTRICTED MAIL (✓) INCLUSION		USPS VERIFICATION				
Agent Name (Printed)	Restricted Delivery Yes (✓)	Adult Signature Restricted Delivery Yes (✓)	Agent Signature (Request signature – if missing)	ID Verified Yes (✓)	USPS Initials	Date

PS Form 3801, September 2016 PSN 7530-02-000-9048

# Caller Service

- Individual/Business needing more pickup times than Firm Holdout and/or have more mail each day than largest PO Box™ will hold.
- Fees based upon a minimum of six months and facility fee group.
- If customer has 5 boxes and needs another separation, must have phantom/caller # fee.
- No keys are provided.
- Reserve numbers available for future use (part of master Caller Service number to reserve for future use).

Caller Number(s) _____ to _____		Reserve Number(s) _____ to _____	
<b>Application for Post Office™ Caller Service</b> <small>Tear off this page, fill out all non-shaded fields, and take it to the Post Office</small>			
1. Will this service be used for: (Required) <input type="checkbox"/> Business/Organization Use <input type="checkbox"/> Residential/Personal Use			
2. Name of Business/Organization (if applicable)			
3. Name of Person Applying (Last, First, MI - include Title if representing a business/organization)			
4. Address Number, street, ste., _____ City, State _____ AL ZIP+4® _____		Verify initials	5. Corporate Address (if different from #4) Number, street, ste., _____ City, State _____ AL ZIP+4 _____
6. Telephone Number (Include Area Code)		7. Email Address (Optional)	
8. Quantity of numbers required: Caller _____ Reserve _____			
9. Applicant must select and enter the ID number for two items of valid identification listed below. Applicant must present the IDs at a Post Office. One item must contain a photograph and one must be traceable to the bearer (prove applicant's physical address). Both must be current.		10. List the name(s) of all other businesses or individuals, including members of a business, who will be receiving mail at this Caller Service. All persons listed must have verifiable identification and, upon request, present this identification to the Postal Service. A parent or guardian may receive the mail of minors by listing their names (no ID is required).	
<input type="checkbox"/> State Driver's License or State ID Card	Verify initials	<input type="checkbox"/> Business Name	Verify initials
<input type="checkbox"/> Passport, Alien Registration Card or Certificate of Naturalization	Verify initials	<input type="checkbox"/> Business Name	Verify initials
<input type="checkbox"/> Current Lease, Mortgage or Deed of Trust	Verify initials	<input type="checkbox"/> Business Name	Verify initials
<input type="checkbox"/> Voter or Vehicle Registration Card	Verify initials	<input type="checkbox"/> Business Name	Verify initials
<input type="checkbox"/> Home or Vehicle Insurance Policy	Verify initials	<input type="checkbox"/> Business Name	Verify initials
<input type="checkbox"/> Armed Forces, Government, University or Recognized Corporate Identification Card	Verify initials	<input type="checkbox"/> Business Name	Verify initials
11. SPECIAL ORDERS Postmaster: The following named persons or representatives of the business/organization listed above are authorized to pick up mail addressed to this (these) Caller Service number(s). All names listed must have verifiable ID and upon request, present this identification to the Postal Service (continue on reverse side if needed).			
Other Authorized Representative	Verify initials	Other Authorized Representative	Verify initials
Other Authorized Representative	Verify initials	Other Authorized Representative	Verify initials
Date Application Received	Service Dates _____ through _____	Customer Eligible for No-Fee Service <input type="checkbox"/> Yes <input type="checkbox"/> No	
12. Signature of Applicant (Same as item 3). I certify that all information furnished on this form is accurate, truthful, and complete. I understand that anyone who furnishes false or misleading information on this form or omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.			Post Office Date Stamp
Privacy Notice: Privacy Act Statement is available on pages 2 and 4 of this form.			
PS Form 1093-C, December 2013 (Page 3 of 4) PSN 7530-11-000-5120			



# General Delivery

- Available at designated offices for transients and individuals waiting for PO Boxes™.
- For mail pickup, verify customer's ID.
- Mail held for 30 days.
- Applicants must complete PS Form 1527.

United States Postal Service			
<b>Application for General Delivery Service</b>			
Post Office Name	State	ZIP Code™	Date of Application
<small>The Postal Service™ delivers mail in the most efficient manner possible. Where possible, mail is delivered by carrier or through Post Office box service. General Delivery Service is intended primarily as a temporary means of delivery for transients, customers who are not permanently located, or customers who want Post Office box service when such service is not available. (See Domestic Mail Manual 508.6.)</small>			
I am applying for General Delivery Service for the following reasons:			
Printed Name		Signature	
Address (No., Street)		City, State, ZIP+4®	
<small>General Delivery mail can be held for no more than 30 days unless otherwise agreed upon by the postmaster. This 30-day time limit specifies how long individual mailpieces are held — it does not limit how long an individual customer may receive General Delivery Service.</small>			
PS Form <b>1527</b> , March 2010 (Page 1 of 2) 7530-01-000-9343			Privacy Act Statement on Page 2

# Informed Delivery<sup>®</sup> 101



# Informed Delivery

- Innovative feature that allows eligible residential and PO Box™ consumers to see digital preview of their mailpieces and packages.
- Optional and Free.
- Majority of ZIP Codes eligible .
- Visit [InformedDelivery.usps.com](https://InformedDelivery.usps.com) for additional information.

## How do I sign up?

- STEP 1:** Visit *[informeddelivery.usps.com](https://informeddelivery.usps.com)* and select “Sign Up for Free.”
- STEP 2:** Go to personal account on [usps.com](https://usps.com), sign in, or create an account.
- STEP 3:** Follow on-screen instructions:
  - Verify eligible address and ZIP Code.
  - Complete identity verification process (online, or in-person at select Post Office locations).
- STEP 4:** Congratulations! You signed up. Try Informed Delivery mobile app to access the feature on-the-go!



# Package Intercept Service

- Can be used for all domestic mailpieces that have a tracking barcode except USPS Marketing Mail and Periodicals.
- Not available for international, APO/FPO/DPO destinations, mailpieces addressed to Commercial Receiving Agency, or that require customs form.
- Customers make their request at [www.usps.com](http://www.usps.com)<sup>®</sup>.
- Payment of applicable postage and fees charged at time of intercept when possible or collected from recipient as postage due upon delivery.

# Counter Activity



## Authorization to Hold Mail:

- Two volunteers, one to role-play the SSA and one the customer.
- Class serves as observers.