

University of Connecticut
Inserting & Addressing Service

Unit-6217

☎ 860-486-4218 FAX 860-486-4663

REQUEST FOR SERVICES

E-Mail your file to (insertingandaddressing@UConn.edu)

Web Address: <http://web.uconn.edu/print/ia/iaservice.html>

Please complete **ALL** entries in this top section of form and sign in order to be placed on the schedule.

Date _____		Contact Person(s) _____ / _____	
Department _____	U# _____	Bldg _____	Rm _____
Name of mailing _____		Mailing Reservation Date _____	Class of mail _____
FRS for labor _____		FRS for Postage _____	
Authorized Signature _____		Phone _____	Fax _____

Services(s) Requested

Please fill out the appropriate box(s) below for the services you will require

<p><input checked="" type="checkbox"/> Inserting Service</p> <p>We only insert into a standard #10 envelope. A maximum of 8 inserts (4 folded and 4 flat sheets) is allowed into an envelope. The Inserts that are not flat sheets must be in the letter fold format. Please detail below what inserts will be going into the envelope, and where they will be coming from.</p> <p>Total of envelopes _____</p> <p>Insert #1 _____</p> <p>Insert #2 _____</p> <p>Insert #3 _____</p> <p>Insert #4 _____</p> <p>Insert #5 _____</p> <p>Insert #6 _____</p> <p>Insert #7 _____</p> <p>Insert #8 _____</p>	<p><input checked="" type="checkbox"/> * Labeling Service & Tabbing Service</p> <p>For our department to proceed with your mailing it is MANDATORY for you to fill the information requested below concerning the size of your finished mail piece design.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Letter size: _____</td> <td style="width:10%; text-align: center;">Length</td> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Height</td> <td style="width:10%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">(minimum) 5"</td> <td></td> <td style="text-align: center;">(minimum) 3-1/2"</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">(maximum) 11-1/2"</td> <td></td> <td style="text-align: center;">(maximum) 6-1/8"</td> <td></td> </tr> <tr> <td>Flat size: _____</td> <td style="text-align: center;">(minimum) 11-1/2"</td> <td></td> <td style="text-align: center;">(minimum) 6-1/8"</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">(maximum) 15"</td> <td></td> <td style="text-align: center;">(maximum) 12"</td> <td></td> </tr> </table> <p>Pieces to be Labeled _____ Pieces to be Tabbed _____</p> <p>Campus Mailing: Send to List _____ (please go to website to view lists)</p> <p>All letter size self-mailers (mail not placed into envelopes) designed with a mailing panel that has a permit imprint will need to be tabbed closed.</p> <p>We request that all flat size mail be designed with the mailing panel at the top of the mail piece.</p>	Letter size: _____	Length		Height			(minimum) 5"		(minimum) 3-1/2"			(maximum) 11-1/2"		(maximum) 6-1/8"		Flat size: _____	(minimum) 11-1/2"		(minimum) 6-1/8"			(maximum) 15"		(maximum) 12"	
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Flat size: _____	(minimum) 11-1/2"		(minimum) 6-1/8"																							
	(maximum) 15"		(maximum) 12"																							

Download Information

Please give us as much information as you can about how you will be sending us your file and its layout. Associate the name you give your file to the name of your mailing. Any file that is not in one of our acceptable formats will be assessed a conversion charge. Formats accepted are: ASCII COMMA DELIMITED.csv, or Excel.xls.

Indicate how you will be sending us your file.

If using a floppy disk; write on the disk your department U#, the name of the file and the number of records.

How will you be sending us your file?

Email _____

Floppy Disk _____

Please specify this information about your file.

Name of file _____

Number of records _____

Format of file _____

Check off the fields from your file that you will be using on your mailing. If you have and want to use a field that is not listed below, please write the field in.

- Prefix
- Suffix
- First Name
- Last Name
- Contact Person
- Business/Firm/Company
- Delivery Address #1
- Delivery Address #2
- City, State, Zip

Job # _____