Request for Package Assembly

Official Use Only	
Control number	Date received

Requestor name		Phone number ( )	Order point number (OPN)
E-Mail address	Date of order	Office symbols	Total number of packages needed
Event/purpose needed			

Products to be Assembled *(attach separate sheet, if necessary)*

Product Number *(ex. Form 1040 EZ)*	**Title**	**Catalog Number**	**Revision Date**	**Quantity per Package**

Products to be Assembled, *Cont.*

Official Use Only	
Control number	Date received

Packaging ☐ Shrink wrap ☐ Loose plastic wrap ☐ Envelope ☐ Folder ☐ Boxed ☐ Other _____

Product/package assembly instructions

Delivery Address(es) *(attach separate sheet, if necessary)*

Delivery address #1		Delivery address contact person	Delivery address #2		Delivery address contact person
		Delivery address contact phone number ( )			Delivery address contact phone number ( )
Quantity needed at this location	Delivery window *earliest date*	Secondary contact name	Quantity needed at this location	Delivery window *earliest date*	Secondary contact name
	latest date	Secondary phone number ( )		*latest date*	Secondary phone number ( )

Loading dock available (If yes, provide delivery hours)
☐ no ☐ yes _____ ☐ AM ☐ PM to _____ ☐ AM ☐ PM
Delivery appointment required (If yes, provide phone number)
☐ no ☐ yes ( ) _____

Loading dock available (If yes, provide delivery hours)
☐ no ☐ yes _____ ☐ AM ☐ PM to _____ ☐ AM ☐ PM
Delivery appointment required (If yes, provide phone number)
☐ no ☐ yes ( ) _____

Ship date	Via	Tracking number	Ship date	Via	Tracking number

Delivery address #3		Delivery address contact person	Delivery address #4		Delivery address contact person
		Deliver address contact phone number ( )			Delivery address contact phone number ( )
Quantity needed at this location	Delivery window *earliest date*	Secondary contact name	Quantity needed at this location	Delivery window *earliest date*	Secondary contact name
	latest date	Secondary phone number ( )		*latest date*	Secondary phone number ( )

Loading dock available (If yes, provide delivery hours)
☐ no ☐ yes _____ ☐ AM ☐ PM to _____ ☐ AM ☐ PM
Delivery appointment required (If yes, provide phone number)
☐ no ☐ yes ( ) _____

Loading dock available (If yes, provide delivery hours)
☐ no ☐ yes _____ ☐ AM ☐ PM to _____ ☐ AM ☐ PM
Delivery appointment required (If yes, provide phone number)
☐ no ☐ yes ( ) _____

Ship date	Via	Tracking number	Ship date	Via	Tracking number

Special delivery instructions

Instructions for Form 13304, Request for Package Assembly

Purpose
Form 13304 is used by IRS offices to request assembly of products for workshops, special events, conferences, and trade shows. Complete a separate form for each type of package to be assembled.

Reminders

- Form 13304 is a fillable PDF form - handwritten copies will not be accepted by the Area Distribution Centers (ADCs).
- A minimum of **15 workdays** is required from the date the Center assigns a control number to the Latest Date annotated in the Delivery Window. A control number will not be assigned until your request is complete and accurate. The requestor should plan for time allowances, as the form may be returned for additional information.
- A Control Number must be received from the ADC to ensure your order can be processed.
- All packages will be shipped to your specified location in boxes.
- For packages that will be repeatedly constructed throughout the year, make your requests on a monthly basis.
- All questions regarding your orders and their status should be addressed to the appropriate ADC Package Assembly email box.

Requestor Name/Phone Number/Order Point Number/E-Mail Address/Date of Order/Office Symbols
This information will be used to send a confirmation number and/or to clarify any questions the ADC has with the request.

Event/Purpose Needed
State the function that requires assembled packages. (Example- Small Business Workshop - Sole Proprietorship)

Total Number of Packages Needed
Enter the total quantity of packages for all delivery locations and dates.

PRODUCTS TO BE ASSEMBLED

Product Number
State the product needed. Include designation of Publication, Instruction, Form, etc. If separate instructions are needed, list them.

Title
State official title of the product.

Catalog Number
Enter the 5 digit and 1 alpha character assigned to the product.

Revision Date
State the month/year of the product. For W-2s, Form 1099s, etc., state the year.

Quantity per Package
State how many copies of each item are in each package.

Packaging
Indicate how each package is to be secured.

- Shrink Wrap - tight, close fitting
- Loose Plastic Wrap - sealed, but not tightly
- Envelope - items placed in a envelope only - not sealed
- Folder - items placed in a folder only
- Boxed - items placed in individual boxes

Product/Package Assembly Instructions
Indicate how each package is to be constructed. Be explicit. (For example: when using a folder, indicate what items are on the left side vs. what items are on the right.)

DELIVERY ADDRESS(ES)

Address #1 (etc.)
Provide the street address (not P.O. Box) where delivery will be accepted. Attach an additional sheet if more than 4 destinations are needed.

Primary/Secondary Contact Name and Phone Number
Indicate the persons at the delivery location to be contacted by the shipping company.

Quantity Needed at this Location
For each location, provide amount to be shipped. These totals should add up to the total on page 1.

Delivery Window
Enter the earliest date and the latest date the packages are to be delivered. All packages will be delivered no later than the "latest date."

Reminder: A minimum of 15 workdays from the date a control number is assigned to the Latest Date is required.

Loading Dock Available
Trucking companies need to know what facilities are available at the delivery location. Indicate whether a loading dock is available and the time frame truckers should plan for delivery, if applicable.

Delivery Appointment Required
Some locations require an appointment for the truckers to make deliveries. If so, indicate a telephone number the shipper may call to schedule their delivery.

Special Delivery Instructions
Enter any other information that is necessary to ensure timely delivery of the order. If sending material to a convention center, fax the shipping documentation to the appropriate ADC to ensure coordination via truckers and convention staff.