Please fill out the following form for verification.

If any required fields are missing, we will not be able to process your request.

|  |
| --- |
| **Required** |
| 1. **Messaging Provider**
 |  |
| 1. **Business Name**
 |  |
| 1. **Business Registered Address**
 | **Address:** | **City:** | **State:** | **Zip:** |
| 1. **Business Contact**
 | **First:** | **Last:** |
| 1. **Business Contact Information**
 | **Email:** | **Phone:** |
| 1. **Number(s)**
 |  |
| 1. **Summarize the use-case**
 |  |
| 1. **How will consumers be opting-in to SMS programs? (Please provide screen shots of opt-in workflows if online)**
 |  |
| 1. **Will the text messages be advertising / promoting a commercial product or service?**
 | [ ]  Yes [x]  No [ ]  Unsure |
| 1. **Was this traffic previously on another messaging service?**
 | [x]  New to Messaging [ ]  Short-Code [ ]  Long-Number |
| 1. **Where is the number published (if anywhere)?**
 |  |
| 1. **Message Templates**
 |  |
| 1. **Corporate Website**
 |  |
| 1. **Call to Actions (in the messaging**
 | **URLs:**  | **Numbers:**  |