DUNS NUMBER APPLICATION FORM

Type of DUNS application *
☐ New DUNS application ☐ Update Address on Existing DUNS

FACILITY DETAILS

Facility Name *
Location specific manufacturing facility name (Not corporate name).

Legal Structure *
e.g. LLC, Inc, Private Ltd, SDN BHD

DBA / Trade style *

Facility Profile *
☐ Parent ☐ Headquarter ☐ None

FACILITY PHYSICAL ADDRESS

Street Address *

Address Line 2

City *

State/Region/Province *

Postal / Zip Code *

Country *

Is billing address the same? *
☐ Yes ☐ No

Are you a 'mobile facility'? *
☐ No ☐ Yes (Over Land) ☐ Yes (Over Water)

BILLING ADDRESS & CONTACT

Billing Street Address

Billing Contact Email

City

State / Province

Country

FACILITY CONTACT PERSON

First Name *

Last Name *

Principal Title (CEO/Owner) *

Facility Contact Email *

Phone (No Country Code) *

APPROVED ADDRESS PROOF DOCUMENTS (MUST PROVIDE 2)

Acceptable Official Documents for satisfying update requirements:
Utility Bills: Electricity, gas, water, or waste management • Internet/Phone Bills: Commercial landline or mobile • Lease or Mortgage Agreements • Official IRS/Tax Letters: EIN or TIN confirmation • Business Insurance Policies: Liability or property • State or Local Tax Permits: Business tax permit or sales tax certificate • Third-Party Invoices: Legitimate vendor invoices • Secretary of State Filings: Approved registration amendments or annual reports.

NAME OF THE AUTHORIZING INDIVIDUAL AND SIGNATURE

Authorizing Name (First) *

Authorizing Name (Last) *

E-Signature Field / Draw Signature

Date *
07/21/2026