



Enabling Connections™

USB Implementers Forum
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VENDOR ID FORM

For Vendor ID Number Only - Not For Membership

Company Name: _____

Contact Person: _____

Email Address: _____

Address 1: _____

Address 2: _____

City: _____ State/Province: _____

Zip / Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

The company set forth above hereby applies for a USB Vendor ID Number and agrees to the following: *The USB Implementers Forum is the authority which assigns and maintains all USB Vendor ID Numbers. Each Vendor ID Number is assigned to one company for its sole and exclusive use, along with associated Product ID Numbers. They may not be sold, transferred, or used by others, directly or indirectly, except in special circumstances and then only upon prior written approval by USB-IF. Unauthorized use of assigned or unassigned USB Vendor ID Numbers and associated Product ID Numbers are strictly prohibited.*

Signature: _____ Date: _____

A one-time processing fee of US\$5,000.00 is required.

We accept Visa, MasterCard, American Express, company checks, and wire transfer payments. We do not accept payment by PO.

For USB-IF use only

ASSIGNED VENDOR ID:

DEC: _____ HEX: _____

LOGO LICENSE RECEIVED: _____
