

**FORM B – ELECTRONIC SERIAL NUMBER MANUFACTURER’S CODE APPLICATION
DISPOSITION**

Your application filed for assignment of an ESN Manufacturer’s Code has been reviewed by the ESN Administrator. The box checked below indicates the action taken:

Your application has been approved. The ESN Manufacturer’s Code assigned for your use is:
.....

The assignment is effective as of:

The information recorded for this assignment is shown below. Please notify the ESN Administrator immediately of any errors in or changes to this information.

(Display computer generated assignment information here.)

Your application has been denied for the following reason(s):

.....
.....

You are entitled to appeal this denial as specified in Section 13 of the assignment guidelines.

The following additional information is needed to process your application:

.....
.....

Authorized name:

Authorized signature:

Date: