

## **Attachment C Example Service Type Menu Form**

- Authorized Entity must include this form in the Referral for Service Packet sent to the Contractor.
- Authorized Entity must indicate one (1) Primary Service Type.
- Authorized Entity may indicate one (1) or more Secondary Service Types when a Primary Service Type is chosen above.
- Contractors must provide Service Attempts for Secondary Service Types in accordance with the Requirements of the Primary Service Type chosen.

### **Primary Service Types**

**Standard Service**

- *Includes three (3) Service Attempts within ten (10) calendar days of Contractor's receipt of the Referral for Service Packet.*

**Rush Service**

- *Includes three (3) Service Attempts within five (5) calendar days of Contractor's receipt of the Referral for Service Packet.*

**Expedited Service**

- *Includes three (3) Service Attempts within eight (8) to twenty-four (24) hours of Contractor's receipt of the Referral for Service Packet.*

**Urgent Service**

- *Includes three (3) Service Attempts within zero (0) to eight (8) hours of Contractor's receipt of the Referral for Service Packet.*

### **Secondary Service Types**

**Substitute Service**

- *Substitutes service from the originally intended recipient of the legal process documents whereby Contractor leaves a copy of the legal process documents with a person who is at least eighteen (18) years of age, is related to the individual listed in the Referral for Service Packet, and resides in the same place as the originally intended recipient of the legal process documents.*

**Standby Service**

\_\_\_\_\_ **Number of 15 Minute Increments**

- *After each unsuccessful Service Attempt, Contractor waits for the recipient of the documents in 15-minute increments as instructed by the Authorized Entity.*

**Multiple Address Service**

\_\_\_\_\_ **Number of additional addresses** (Primary address not included in total.)

- *Provides an option for providing Service Attempts to address(s) in addition to the one (1) address included in a Primary Service Type.*
- *Authorized Entity should list additional addresses on the Service Information Form included in the Referral for Service Packet.*

**Skip Trace / Attempt to Locate Services**

- *Includes services to attempt to locate a person.*