PROCEDURES FOR ADDING UNIVERSAL PRODUCT CODES (UPCs) TO THE DELAWARE WIC APPROVED PRODUCT LISTING (APL)

To submit a request to add a food item to the WIC Program's APL, vendors must:

- 1. Complete the Delaware WIC Program UPC Application Form (see Attachment) for each product to be added to, modified in, or deleted from the APL database.
- 2. Email your request by attaching the UPC Application Form along with the product label or photographs of the product front and back labels to dhsswicvendorhelpdesk@state.de.us. You can also fax the UPC Application Form and product label, to the eWIC Coordinator. The product label must include the product name, size, manufacturer, nutritional facts, and UPC barcode in acceptable format. If the request is mailed, the actual product label or photographs must be included. No copies please. Send to:

Delaware WIC Program
Attn: eWIC Vendor Coordinator
655 S Bay Road # 1C
Dover, DE 19901-4656

Fax number (302) 741-2901

- The State WIC Agency will review the food item and determine if the product will be accepted for the APL.
 With exception of fresh fruits and vegetables (Cash Value Benefit items), food products without a UPC code denoted on the container will not be added to the APL.
- 4. A copy of the UPC Application Form can be found on our webpage at: http://www.dhss.delaware.gov/dhss/dph/chca/dphwicveninf01.html.

If you have any questions, call the Delaware WIC Program at (302) 741-2900.

Delaware WIC Program UPC Application Form

UPC APPLICATION FORM			
UPC Action	☐ Add ☐ Modify	/ Delete	
Product Name:			
Product Price:			
Name of Store, Manufacturer, or Wholesaler requesting a UPC addition to the APL:			
UPC Code			
UPC-A (12 digits) or EAN- 13 (13 digits) formats only including check digit.		а	
Contact Name			
Contact Email			
WIC Vendor Identification Number (if applicable):			
Daytime Phone			
Address: Street			
City, State, Zip Code	-		
Signature			
Date	DIEAC	E DRINT LECIBLY	
For State WIC Agency Use Only APPROVED DENIED (REASON FOR DENIAL)			
SIGNATURE OF eWIC COORDINATOR			DATE

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