## Mail Box & Postal 411 E. Huntington Dr. Suite 107 Arcadia, CA 91006 (626) 447-8260

Box #	_ Size	_ Months _	\$	
	Ma	ilbox Set Up	Fee \$	
		24hr. Access	Fee §	S
			9	3
		Total	9	`

	<b>Application</b>	on for Mail Box Ro	<u>ental</u>
This Agreement made by and between and Mail Box & Postal, hereinafter referre	ed as to "Agent", shall b	e governed by these terms	hereinafter referred as "Applicant", s to which each party agrees:
not to exceed that for which rent has been	paid in advance. Applic	ant agrees to use service i	SPS, applicant appoints Agent for the receipt for a period in accordance with Agent's rules and in compliance with o so will result in cancellation of services without notice,
key deposit shall be collected from Applie	cant by Agent, said depo	sit shall be refunded upor	nderstood that all rents once paid, are not refundable. A napplicants termination and return of said key on or e charged if original loaned key is not returned.
has placed Applicant's mail in the assigned or damage. Agent is not engaged in the dear to deliver it in timely fashion or undampossession of a key is evidence of authorical control of the control of t	d mail box, the mail sha divery of mail and cannot aged condition. Should by to collect mail or parc applicant will pick up ma	all be deemed to have been to the responsible for failure. Applicant appoint another tels. Applicant shall use the	ecial service deliveries that require signature. Once Agent in delivered; Agent shall not be responsible for loss, theft re of the USPS, FedEx, UPS or any other carrier to deliver it person or organization, Agent shall assume that the premises for the purposes of receiving mail and other with or make other suitable arrangements, mail pick up
provide photo identification. Additional n changed on quarterly billing cycle. If App shall reserve the right to require Applican activity. High volume of mail and parcels	nonthly fee shall apply for licant consistently receif to rent a larger size box may require assessment	or extra person or organiz ves substantially more ma x or one or more. Charges of additional fees, further	nailbox and each must complete a USPS Form 1583 and ation names. Person or organization names may be atil or parcels than can be placed in a single mailbox, Agent for service are based upon average daily volume and a agrees parcels delivered to this address for Applicant us or dangerous material will be delivered.
law enforcement purposes, in which case federal agencies or their representatives. S	Agent intend to coopera should Agent commit or	te fully. Law enforcement fail to commit any act wh	e disclosed without Applicant's prior consent, except for t is further clarified to include all city, county, state or nich results in disruption of service and Applicant thereby nt for service not received. Agent shall not be liable for
	uption or cancellation of	f service, a late fee of \$5.0	d no later than ten (10) days before due date. Failure to 00 will be added after the fifth day. Agent has the right to at.
	lude the right designation Business Name  Dr. Suite 107		ER DESIGNATION IS VALID. USPS may refuse to le for notifying correspondents of below address.
Applicant understand, upon termination U	SPS will not forward or for required fee. In the e	accept Change of Address event Applicant fails to do	Agent shall not make Applicant's mail available. ss. If such service is requested by Applicant, Applicant oso, Agent shall refuse any further mail and prior received
Agent, Mailbox & Postal	Date	Applicant	Date
	Term	ination Addendun	1
At termination of service, I hereby instruction (initial) Forward my mail to new (initial) Handle such mail in acc	v address. In considerati		for services requested.

## United States Postal Service®

## **Application for Delivery of Mail Through Agent**

See Privacy Act Statement on Reverse

1. Date			

In consideration of delivery of my or our (firm) mail to the agent named below, the addressee and agent agree; (1) the addressee or the agent must not file a change of address order with the Postal Service™ upon termination of the agency relationship; (2) the transfer of mail to another address is the responsibility of the addressee and the agent; (3) all mail delivered to the agency under this authorization must be prepaid with new postage when redeposited in the mails; (4) upon request the agent must provide to the Postal Service all addresses to which the agency transfers mail; and (5) when any information required on this form changes or becomes obsolete, the addressee(s) must file a revised application with the Commercial Mail Receiving Agency (CMRA).

NOTE: The applicant must execute this form in duplicate in the presence of the agent, his or her authorized employee, or a notary public. The agent provides the original completed signed PS Form 1583 to the Postal Service and retains a duplicate completed signed copy at the CMRA business location. The CMRA copy of PS Form PS 1583 must at all times be available for examination by the postmaster (or designee) and the Postal Inspection Service. The addressee and the agent agree to comply with all applicable Postal Service rules and regulations relative to delivery of mail through an agent. Failure to comply will subject the agency to withholding of mail from delivery until corrective action is taken.

This application may be subject to ve- business at the home or business add						conducts		
2. Name in Which Applicant's Mail Will Be Received for Delivery to Agent. (Complete a separate PS Form 1583 for EACH applicant. Spouses may complete and sign one PS Form 1583. Two items of valid identification apply to each spouse. Include dissimilar information for either spouse in appropriate			3a.Address to be Used for Delivery (Include PMB or # sign.)					
box.)	in for chiner	орошое ит арргорише	3b. City	3c.	State	3d. ZIP + 4 <sup>®</sup>		
			Arcadia		CA	91006		
4. Applicant authorizes delivery to and in care of:  a. Name  Mail Box & Postal  b. Address (No., street, apt./ste. no.) 411 E. Huntington Dr. Suite 107			5. This authorization is extended to include restricted delivery mail for the undersigned(s):					
			Authorization To Accept Registered, Certified and Special Delivery Mail.					
								c. City  Arcadia
6. Name of Applicant			7a. Applicant Home Address (No., street, apt /ste. no)					
8. Two types of identification are required. One must contain a photograph of the addressee(s). Social Security cards, credit cards, and birth certificates are unacceptable as identification. The agent must write in identifying		7b. City	7c.	State	7d. ZIP + 4			
information. Subject to verification. a.			7e. Applicant Telephone Number (Include area code)					
			9. Name of Firm or Corporation					
b.		10a. Business Address (No., street, apt /ste. no)						
			10b. City	10c.	. State	10d. ZIP + 4		
Acceptable identification includes: valid driver's license or state non-driver's identification card; armed forces, government, university, or recognized corporate identification card; passport, alien registration card or certificate of naturalization; current lease, mortgage or Deed of Trust; voter or vehicle registration card; or a home or vehicle insurance policy. A photocopy of your identification may be retained by agent for verification.			10e. Business Telephone Number (Include area code)					
			11. Type of Business					
12. If applicant is a firm, name each membe of minors receiving mail at their delivery		ail is to be delivered. (Al	I names listed must have verifia	ble identification. A	guardi	an must list the names		
13. If a CORPORATION, Give Names and Addresses of Its Officers			14. If business name <i>(corporation or trade name)</i> has been registered, give name of county and state, and date of registration.					
Warning: The furnishing of false or misleadi imprisonment) and/or civil sanctions (include				y result in criminal s	anctio	ns (including fines and		
15. Signature of Agent/Notary Public			16. Signature of Applicant (If the by officer. Show title.)	ïrm or corporation, a	applica	tion must be signed		

<b>Privacy Act Statement:</b> Your information will be used to authorize the delivery of your mail to the designated addressee as your agent. Collection is authorized by 39 USC 401, 403, and 404. Providing the information is voluntary, but if not provided, we cannot provide this service to you. We do not disclose your information without your consent to third parties, except for the following limited circumstances: to a congressional office on your behalf; to financial entities regarding financial transaction issues; to a USPS® auditor; to entities, including law enforcement, as required by law or in legal proceedings; to contractors and other entities aiding us to fulfill the service; and for the purpose of identifying an address as an address of an agent who receives mail on behalf of other persons. Information concerning an individual who has filed an appropriate protective court order with the postmaster will not be disclosed except pursuant to court order. For more information on our privacy policies, see our privacy link on usps.com®.	