### POSTAL & SHIPPING SERVICES BY MAX

2620 S. Maryland Parkway Suite 14

Las Vegas, NV 89109 -1692 SE Corner of Maryland & Sahara Phone: 702-650-2222 Fax: 702-733-7497

info@lasvegasmailforwarding.com

### Greetings!

For your added convenience, you can obtain mail box rental service by completing both of the attached forms. The forms can be mailed or faxed to us to commence service, but we are required to maintain originals, so do remember to MAIL THE ORIGINALS to us.

Please call us if you have any questions or if you need assistance. Thank you for your time and consideration. We look forward to exceeding your service expectations.

Sincerely,

Note: Multiple users (including spouses) of an individual box must each complete a set of forms.

Max Kostiner

## **Instructions for Completing Form 1583**

Please review the "Instructions and Footnotes" at the top of form 1583, page 2, which briefly describes U.S. Postal Regulations.

To complete U. S. Postal Service form 1583:

- You must have your signature notarized when you sign item number Thirteen (13a). We do provide Notary Services.
- Note that if more than one name is to receive mail then each person must complete their own form 1583 and have their signature notarized.
- If the mail box will be used for business purposes, complete all items under number seven (7a through i) in detail.
- Specific forms of ID are required. Review numbers 8e, 9g, and 10a on page one of form 1583. Also carefully review numbers 4, 6, 9, 10, 11, and 12 on page 2 of form 1583. Social Security Cards, Birth Certificates, and credit cards are NOT acceptable forms of ID. Our staff must fill in this information on the form.

## Instructions for Completing Mail Box Service Agreement

Please read the entire Service Agreement.

To complete our Service Agreement form:

- Fill in your information at the top of the service agreement.
- Initial paragraph fourteen (14) on page 3 of the service agreement.
- Sign and date the service agreement at the bottom of page 3.

That is all there is to it! Our personal support staff will confirm your account by phone. Please remember to MAIL THE ORIGINALS to us.



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

See Reverse for Instructions, De	211111110115, <i>1</i>	agreemen	it ierms, and	the Privacy Act Statement.			
Private Mailbox (PMB) Information     And Date PMB Opened	1b. Date PMB Closed			8. Photo ID Information for Applicant <sup>e</sup> 8a. Applicant's Name	8b. Applicant's ID Number		
***************************************							
Commercial Mail Receiving Agency (CMRA) Place of Business Information     Address to be Used for Delivery     2b. PMB #			8c. Issuing Entity  8d. Expiration Date on the ID				
2620 South Maryland Parkwa	ay, #14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
2c. City	2d. State	2e. ZIP +	4®	8e. Photo ID type (check one)			
Las Vegas NV 89109-1692		☐ U.S. State/Territory/Tribal Driver's or Nondriver's ID Card¹0					
3. Type of Service Requested  Business/Organization Use <sup>2</sup> Residential/Personal Use <sup>3</sup>				Uniformed Service ID Passport Certificate of Naturalization U.S. Access Card Matricula Consular U.S. Permanent Resident Card U.S. University ID Card NEXUS Card			
4. Name of Applicant 4a. Last Name 4b. First Name 4c. Middle Initial			9. Address ID Information for Applicant <sup>11</sup> 9a. Applicant's Name				
4d. Telephone Number (include area code)  4e. Email Address			9b. Applicant's Street Home Address¹				
4f. Applicant's Street Home Address <sup>1,4</sup>	h			9c. City	9d. State 9e.	ZIP + 4	9f. Country
4g. City	4h. State	41. ZIP + 4	4j. Country	9g. Address ID type (check one) — Must Cont	tain the Address in 9	9b-9f	L
				U.S. State/Territory/Tribal Driver's or Nor	ndriver's ID Card <sup>10</sup>		
4k. Is applicant a court-ordered protected in	dividual?	/es 🗆	No.		ome or Vehicle Ins		
If "Yes", you must attach a copy of the co			110	☐ Mortgage or Deed of Trust ☐ \	ehicle Registration	Card	☐ Voter Card
5. Authorized Individual <sup>5</sup> 5a. Last Name 5b. First Name	ame	5c.	Middle Initial	10. Photo ID Information for Authorized Inc 10a. Authorized Individual's Name	lividual (if applicab 10b. Authorized Ir		D Number
5d. Telephone Number (include area code)	5e. Email Add	ress		10c. Issuing Entity	10b. Expiration D	ate on the I	ō
5f. Authorized Individual's Street Home Address <sup>1,6</sup>		10e. Photo ID type (check one)  ☐ U.S. State/Territory/Tribal Driver's or Nondriver's ID Card¹²					
5g. City	5h. State	5i. ZIP + 4	5j. Country	☐ Uniformed Service ID ☐ Passport ☐ Certificate of Naturalization ☐ U.S. Access Card ☐ Matricula Consular ☐ U.S. Permanent Resident Card ☐ U.S. University ID Card ☐ NEXUS Card			
6. If Transferring PMB Mail to Another Addr	ess <sup>7</sup>			11. Address ID Information for Authorized I	ndividual (if applic	able)11	
6a. Street Address Mail Is Transferred To <sup>1</sup>			11a. Authorized Individual's Name				
6b. City	6c. State	6d. ZIP + 4	6e. Country	11b. Authorized Individual's Street Home Add	ress <sup>1</sup>	***************************************	a de la constanta de la consta
6f. Telephone Number (include area code)	6g. Email Add	ress		11c. City	11d. State   11e	. ZIP + 4	11f. Country
7. Business/Organization Information 7a. Name of Business/Organization	1.78	. Type of Rus	siness	11g. Address ID type (check one) — Must Contain the Address in 11b-11f			
7a. Name of Business/Organization 7b. Type of Business			U.S. State/Territory/Tribal Driver's or Nondriver's ID Card¹⁰  ☐ Current Lease ☐ Home or Vehicle Insurance Policy ☐ Mortgage or Deed of Trust ☐ Vehicle Registration Card ☐ Voter Card				
7c. Business Street Address¹		4		12. Exceptions for Additional Recipients of	Mail <sup>13</sup>		
7d. City	7e. State	7f. ZIP + 4	7g. Country	13a. Signature of Applicant <sup>14</sup>		13b. Da	te
7h. Telephone Number (include area code)	7i. Place of Re	egistration <sup>8</sup>	era Paraja a reservirante de la companya de la comp	14a. Signature of CMRA or Authorized Emp	oloyee <sup>15</sup>	14b. Da	te

#### Instructions and Footnotes

-	
1	Include house number, street, and apartment/suite number if applicable.
2	For Business/Organization Use, complete item 7.
3	For Residential/Personal Use, complete a separate PS Form 1583 for each adult using this PMB.
4	Address must match document provided in item 9b.
5	The Applicant authorizes mail to be collected by the individual noted in item 5.
6	Address must match document provided in item 11b.
7	Complete item 6 if the mail addressed to this PMB is to be transferred, mailed, shipped, or emailed to another address.
8	The place of registration is the county and state (if domestic), or the country (if foreign).
9	Two types of identification are required for both the Applicant and, if listed, the Authorized Individual. One ID must be a government-issued photo ID. The second must confirm the Applicant's or Authorized Individual's address listed on this form. The acceptable types of photo ID are listed in items 8e and 10e. Attach a copy of the photo and address ID documents.
10	Although the driver's/nondriver's ID is listed in 8e and 9g as an option for both the Applicant's photo ID and address ID, it may be used for only one of the IDs (either photo ID or address ID), not for both.
11	The acceptable types of address verification are listed in items 9g and 11g. Attach a copy of the photo and address ID documents.
12	Although the driver's/nondriver's ID is listed in 10e and 11g as an option for both the Authorized Individual's photo ID and address ID, it may be used for only one of the IDs (either photo ID or address ID), not for both.
13	For Business/Organization Use: List members who will be receiving mail at this PMB. Each person listed must, upon request, present two forms of valid ID to the Postal Service.  For Residential/Individual Use: A parent or guardian may receive the mail of a minor by listing the minor's name — the minor's ID is not required.
14	By signing this form, the applicant certifies the following — for Business/Organization Use, an officer must sign the application and provide his or her title:
	I certify that all information furnished on this form is accurate, truthful, and complete. I understand that anyone who furnishes false or misleading information on this form or omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.
15	The agent or an authorized employee may sign item 14a. If the Notary Public box at the bottom of page 2 has a seal, the Notary Public completes the box.

#### **Definitions:**

Agent: The Commercial Mail Receiving Agency (CMRA). Authorized employee: An employee of the CMRA who is authorized to act on the CMRA's behalf. Authorized individual: A person who is authorized to pick up mail for the PMB holder.

Agreement: In consideration of delivery of my mail or our firm's mail to the agent named on Page 1, the applicant and agent agree: (1) the applicant 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 applicant 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) 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 applicant must file an updated application with the agent.

NOTE: The applicant must sign or confirm their signature in the physical or virtual presence (in real-time audio and video) of the Agent or the Agent's authorized employee or acknowledge their signature in the physical or virtual presence (in real-time audio and video) of a notary public commissioned in a United States state, territory, possession, or the District of Columbia. The agent uploads the original completed signed PS Form 1583 to the Postal Service's CMRA Customer Registration Database and retains the completed signed copy at the CMRA business location. The CMRA copy of PS Form 1583 must at all times be available for examination by the postmaster (or designee) and the Postal Inspection Service. The applicant 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 verification procedures by the Postal Service to confirm that the applicant resides or conducts business at the home or business address listed in items 4f or 7c, and that the identifications listed in items 8–11 are valid. The agent must complete items 2a–2e, and items 14a and 14b if necessary (i.e., if the agent is the witness), and the customer must complete all the other items.

Privacy Act Statement: Your information will be used to administer the Commercial Mail Receiving Agency (CMRA) application, enrollment, and fulfillment processes, to verify your identity when applying for service via a CMRA, to ensure proper and secure delivery of mail to the correct recipient, and to permit delivery of your mail to your authorized agent. Collection is authorized by 39 USC 401, 403, and 404. Supplying the information is voluntary, but if not provided, we will not be able to fulfill your request for delivery of mail through an agent. We do not disclose your information without your consent to third parties, except for the following limited circumstances: incident to legal proceedings involving the Postal Service; for law enforcement purposes; to a congressional office on your behalf; to agents or contractors when necessary to fulfill a business function; to a U.S. Postal Service auditor: to labor organizations as required by applicable law; to government agencies in connection with decisions as necessary; to agencies and entities for financial matters; and for customer service purposes. In addition, information may be disclosed for the purpose of identifying an address as an address of an agent to whom mail is delivered on behalf of other persons. However, this specific routine use does not authorize the disclosure of the identities of persons on behalf of whom agents receive mail. All routine uses are subject to the following exception: Information concerning an individual who has filed an appropriate protective court order with the application will not be disclosed except pursuant to the order of a court of competent jurisdiction and subject to the approval of the USPS General Counsel. For more information on our privacy policies, visit www.usps.com/privacypolicy.

Notary Public in and for the STATE OF		Official Seal:
COUNTY OF	On this day of, 20,	
the applicant,	, who proved to me on the basis of satisfactory evidence to	
be the person whose name is subscribed to	to the application, appeared before me, and acknowledged their signature.	
Signature of Notary Public	My commission expires:	

# MAX'S MAILBOX SERVICE AGREEMENT

To complete this form, p below paragraph 14. Sig	lease read carefully and fill in your gn and date the bottom of page 3. The	information below. Initial on the providing hank you.	ded line
Customer Name:			
Company Name:			
Home Phone:	Work Phone:	Mobile Phone:	
Fax Number:			
E-mail Address:			
2) Customer agrees that (illegitimate or fraudulent agrees that any use of the Each individual or entity authorized to receive mails) This Agreement and F be disclosed upon written mandated. Upon request, any required acknowledg version of this Agreemen	or and services related to a mailbox ath Maryland Parkway, Las Vegas, No Customer will not use the Center prepurpose or for any purpose prohibit a Mailbox shall be in conformity with must complete a separate U.S. Postal or packages at the Mailbox.  orm 1583 shall remain confidential, a request of any law enforcement or Customer agrees to complete all need ment form relating to service of protest and Form 1583 upon request.	and entered into by the customer identific (the "Mailbox") at the Postal and Shipp Nevada 89109 under the following terms emises or any Center services for any unted by U.S. postal regulations. Custome th all applicable federal, state and local lead Service Form 1583 ("Form 1583") to except that this Agreement and Form 1 other governmental agency, or when less excessary documents, including Form 158 possess. Customer further agrees to sign any evidence that the possessor is duly outlook.	oing s: alawful, or further aws. be 583 may gally 3 and n updated
require the appropriate do	I the Mailbox. In the event of death	vidence that the possessor is duly author n or incapacity of Customer, the Center value executor of the estate, the trustee or of a requesting party.	x/i11
Customer agrees to pay a fin the event the Mailbox of \$ 15.00. Mailbox serve Customer receives an unreasonable judgment, the additional charge. The Cecustomer adds additional	ag payment. → There will be no prorection late fee of \$ 10.00 if any payment is lock is changed upon the request or sice fees and other related fees stated easonable volume of mail or package. Center may require Customer to upgenter reserves the right to increase the	rations or refunds for cancellation of any is not received within Ten(10) days of w fault of Customer, Customer agrees to play the Mailbox according to the Centigrade to a larger size mailbox and pay and Mailbox service fees in the event that of those individuals or entities authorized.	y service.  when due.  pay a fee  ent that  eer's  ny

## MAX'S MAILBOX SERVICE AGREEMENT

- 6) Upon expiration, cancellation or termination of this Agreement, the Center will:
- A). Re-mail (i.e., forward) Customer's mail for Six (6) months, →provided Customer pays the postage, packaging material, and forwarding fees in advance. Additionally, Customer must pay a monthly storage fee of \$ 10.00 for month one(1), and \$ 10.00 for months Two(2) through Six(6) in advance for the time period that mail is to be forwarded. It is Customer's responsibility to make arrangements with the Center to identify any mail forwarding needs prior to the expiration, cancellation or termination of this Agreement. Customer understands that the USPS will not forward or return mail without payment and will not accept a Change of Address.
- B). Store the mail or packages for up to six (6) months provided Customer pays a storage fee of \$ 10.00 per month for the time period in which the Center holds the mail or package(s). It is the Customer's responsibility to make arrangements with the Center to identify any mail storage needs prior to the expiration, cancellation or termination of this Agreement.
- C). Retain Customer's mail, other than Unsolicited Mail, at the Center for a period of Thirty (30) days, if Customer leaves no forwarding fees and forwarding address. After such time, any mail or package may be discarded or destroyed.
- D). Discard or destroy any "Unsolicited Mail" (e.g., bulk mail; mail addressed as "occupant," "current resident" or similar designation; or coupons, advertising or other promotional material) delivered to or remaining at the Center.
- E). Refuse any package addressed to Customer delivered by any party other than the U.S. Postal Service, such as a commercial courier service.
- 7) Six (6) months after the expiration, cancellation or termination of this Agreement, the Center will:
- A). Refuse any mail or package addressed to Customer and delivered to the Center.
- B). Discard or destroy any of Customer's mail or package delivered to or remaining at the Center at such time.
- 8) The term of this Agreement shall be the initial period paid for by Customer and any renewal period paid for by Customer from time to time. Renewal of this Agreement for additional terms shall be at the Center's sole discretion.
- 9) Customer agrees that the Center may terminate or cancel this Agreement for good cause at any time by providing Customer Thirty (30) days written notice. Good cause shall include but is not limited to:
- A) Customer abandons the Mailbox;
- B) Customer uses the Mailbox for unlawful, illegitimate or fraudulent purposes;
- C) Customer fails to pay monies owed the Center when due;
- D) Customer receives an unreasonable volume of mail or packages;
- E) Customer engages in offensive, abusive or disruptive behavior toward other customers of the Center or the Center's employees; and
- F) Customer violates any provision of this Agreement. Customer acknowledges that, for the purpose of determining good cause for termination of this Agreement as provided herein, the actions of any person authorized by Customer to use the Mailbox will be attributed to Customer.
- 10) Any written notice to Customer required or permitted under this Agreement shall be deemed delivered Twenty-four (24) hours after placement of such notice in Customer's Mailbox or at the time personally delivered to Customer. In the event of a termination notice based upon abandonment of the Mailbox, notice shall be deemed delivered
- A) on the next day after placing in the hands of a commercial courier service or

## **MAX'S MAILBOX SERVICE AGREEMENT**

B) the United States Postal Service Five (5) days after placement in the United States Mail and addressed to Customer at Customer's address as set forth in Form 1583 item nine (9), or on the date of actual receipt, whichever is earlier.

- 11) As Customer's authorized agent for receipt of mail, the Center will accept all mail, including registered, insured and certified items. Unless prior arrangements have been made, the Center shall only be obligated to accept mail, or packages delivered by commercial courier services which require a signature from the Center as a condition of delivery. Customer must accept and sign for all mail and packages upon the request of the Center. Packages not picked up within Thirty (30) days of notification will be subject to a storage fee of \$5.00 per day per package, which must be paid before Customer receives the package. In the event Customer refuses to accept any mail or package, the Center may return the mail or package to the sender and Customer will be responsible for any postage or other fees associated with such return. C.O.D. items will be accepted ONLY if prior arrangements have been made and payment in advance is provided to the Center.
- 12) Customer agrees to protect, indemnify, defend and hold harmless the Postal and Shipping Center, and MSP Corporation and employees from and against any and all losses, damages, expenses, claims, demands, liabilities, judgments, settlement amounts, costs and causes of action of every type and character arising out of or in connection with the use or possession of the Mailbox, including without limitation, any demands, claims and causes of action for personal injury or property damage arising from such use or possession, from failure of the U.S. Postal Service or any commercial courier service to deliver on time or otherwise deliver any items (mail, packages, etc.), from damage to or loss of any package or mail, or to the Mailbox contents by any cause whatsoever, and from any violation by Customer of applicable federal, state or local laws. Customer understands that agreement/relationship of the parties is one of bailment and not landlord and tenant.
- 13) Customer acknowledges and agrees that the Center is an independently owned and operated Business.

14) CUSTOMER HEREIN AGREES THAT THE TOTAL AMOUNT OF LIABILITY OF THE CENTER IF
ANY, FOR ANY AND ALL CLAIMS ARISING OUT OF OR RELATED TO THIS AGREEMENT SHALL
NOT EXCEED \$ 100.00 REGARDLESS OF THE NATURE OF THE CLAIM.
**Required** INITIAL HERE:

- 15) Customer **must** use the exact mailing address for the Mailbox without modification as set forth in Section two (2) of Form 1583. The Postal Service will return mail without a proper address to the sender endorsed "Undeliverable as Addressed."
- 16) Delivery by commercial courier services must be made to the Centers street address only. Upon signing this Agreement, Customer \*\*must provide two forms of valid identification, one of which MUST include a valid ID photograph.\*\* This Agreement may not be amended or modified, except in a writing signed by both parties.
- \*\*Note: Social Security cards, credit cards and birth certificates are not acceptable forms of identification per USPS. Please see sections eight (8e) ,nine (9g), and section ten (10e), for valid forms of ID. Additional ID information is located at the top of page 2 on form 1583. The ID information is listed under "Instructions and Footnotes."

CUSTOMER SIGNATURE: X	Date:	
AUTHORIZED Center Representative:	Date:	Control of the Contro
How did customer hear about us?		