



# Application for Delivery of Mail Through Agent

See Reverse for Instructions, Definitions, Agreement Terms, and the Privacy Act Statement.

<b>1. Private Mailbox (PMB) Information</b>		<b>8. Photo ID Information for Applicant<sup>9</sup></b>	
1a. Date PMB Opened	1b. Date PMB Closed	8a. Applicant's Name	8b. Applicant's ID Number
<b>2. Commercial Mail Receiving Agency (CMRA) Place of Business Information</b>		<b>9. Address ID Information for Applicant<sup>11</sup></b>	
2a. Street Address to be Used for Delivery <sup>1</sup> <b>102 W. SERVICE RD</b>		2b. PMB #	
2c. City <b>CHAMPLAIN</b>		2d. State <b>NY</b>	
2e. ZIP + 4 <sup>®</sup> <b>12919-4440</b>		8e. Photo ID type (check one)	
<b>3. Type of Service Requested</b>		<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>10</sup> <input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> Business/Organization Use <sup>2</sup> <input type="checkbox"/> Residential/Personal Use <sup>3</sup> <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card	
<b>4. Name of Applicant</b>		9a. Applicant's Name	
4a. Last Name	4b. First Name	4c. Middle Initial	
4d. Telephone Number (include area code)		4e. Email Address	
4f. Applicant's Street Home Address <sup>1,4</sup>		9b. Applicant's Street Home Address <sup>1</sup>	
4g. City		4h. State	4i. ZIP + 4
4j. Country		9c. City	9d. State
4k. Is applicant a court-ordered protected individual? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," you must attach a copy of the court order.		9e. ZIP + 4	9f. Country
<b>5. Authorized Individual<sup>6</sup></b>		9g. Address ID type (check one) — Must Contain the Address in 9b–9f	
5a. Last Name	5b. First Name	<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>10</sup> <input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy <input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card	
5c. Middle Initial	<b>10. Photo ID Information for Authorized Individual (if applicable)<sup>9</sup></b>		
5d. Telephone Number (include area code)	5e. Email Address	10a. Authorized Individual's Name	10b. Authorized Individual's ID Number
5f. Authorized Individual's Street Home Address <sup>1,6</sup>		10c. Issuing Entity	10d. Expiration Date on the ID
5g. City	5h. State	10e. Photo ID type (check one)	
5i. ZIP + 4	5j. Country	<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>12</sup> <input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card	
<b>6. If Transferring PMB Mail to Another Address<sup>7</sup>...</b>		<b>11. Address ID Information for Authorized Individual (if applicable)<sup>11</sup></b>	
6a. Street Address Mail Is Transferred To <sup>1</sup>		11a. Authorized Individual's Name	
6b. City	6c. State	11b. Authorized Individual's Street Home Address <sup>1</sup>	
6d. ZIP + 4	6e. Country	11c. City	
6f. Telephone Number (include area code)	6g. Email Address	11d. State	11e. ZIP + 4
<b>7. Business/Organization Information</b>		11f. Country	11g. Address ID type (check one) — Must Contain the Address in 11b–11f
7a. Name of Business/Organization	7b. Type of Business	<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>12</sup> <input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy <input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card	
7c. Business Street Address <sup>1</sup>		<b>12. Exceptions for Additional Recipients of Mail<sup>13</sup></b>	
7d. City	7e. State	13a. Signature of Applicant <sup>14</sup>	
7f. ZIP + 4	7g. Country	13b. Date	
7h. Telephone Number (include area code)	7i. Place of Registration <sup>8</sup>	14a. Signature of Witness <sup>15</sup>	
		14b. Date	