



# 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>5. Photo ID Information for Applicant*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        |
| 1a. Date PMB Opened                                                                                                                                                     | 1b. Date PMB Closed  | 5a. Applicant's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 5b. Applicant's ID Number              |
| <b>2. Commercial Mail Receiving Agency (CMRA) Place of Business Information</b>                                                                                         |                      | <b>6c. Issuing Entity</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                        |
| 2a. Street Address to be Used for Delivery<br>2780 E. Fowler ave                                                                                                        |                      | 6d. Expiration Date on the ID                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        |
| 2b. PMB #<br>MCPQA1562                                                                                                                                                  |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| 2c. City<br>Tampa                                                                                                                                                       | 2d. State<br>FL      | 2e. ZIP + 4 <sup>®</sup><br>33612                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                        |
| <b>3. Type of Service Requested</b>                                                                                                                                     |                      | <b>8a. Photo ID type (check one)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                        |
| <input type="checkbox"/> Business/Organization Use <sup>1</sup> <input type="checkbox"/> Residential/Personal Use <sup>2</sup>                                          |                      | <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>3</sup><br><input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization<br><input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matrícula Consular <input type="checkbox"/> U.S. Permanent Resident Card<br><input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEDUS Card |                                        |
| <b>4. Name of Applicant</b>                                                                                                                                             |                      | <b>8. Address ID Information for Applicant*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| 4a. Last Name                                                                                                                                                           | 4b. First Name       | 8a. Applicant's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                        |
| 4c. Middle Initial                                                                                                                                                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| 4d. Telephone Number (include area code)                                                                                                                                |                      | 4e. Email Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                        |
| 4f. Applicant's Street Home Address <sup>4,5</sup>                                                                                                                      |                      | 9b. Applicant's Street Home Address <sup>6</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                        |
| 4g. City                                                                                                                                                                |                      | 9c. City                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 9d. State                              |
| 4h. State                                                                                                                                                               |                      | 9e. ZIP + 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 9f. Country                            |
| 4i. ZIP + 4                                                                                                                                                             |                      | 9g. Address ID type (check one) — Must Contain the Address in 9b-9f                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |
| 4j. Country                                                                                                                                                             |                      | <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>3</sup><br><input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy<br><input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card                                                                                                                                 |                                        |
| 4k. Is applicant a court-ordered protected individual? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "Yes," you must attach a copy of the court order. |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| <b>5. Authorized Individual*</b>                                                                                                                                        |                      | <b>10. Photo ID Information for Authorized Individual (if applicable)*</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                                        |
| 5a. Last Name                                                                                                                                                           | 5b. First Name       | 10a. Authorized Individual's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 10b. Authorized Individual's ID Number |
| 5c. Middle Initial                                                                                                                                                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| 5d. Telephone Number (include area code)                                                                                                                                | 5e. Email Address    | 10c. Issuing Entity                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 10d. Expiration Date on the ID         |
| 5f. Authorized Individual's Street Home Address <sup>4,5</sup>                                                                                                          |                      | 10e. Photo ID type (check one)                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |
| 5g. City                                                                                                                                                                |                      | <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card <sup>3</sup><br><input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization<br><input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matrícula Consular <input type="checkbox"/> U.S. Permanent Resident Card<br><input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEDUS Card |                                        |
| 5h. State                                                                                                                                                               |                      | 5i. ZIP + 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                        |
| 5j. Country                                                                                                                                                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| <b>6. If Transferring PMB Mail to Another Address*, ...</b>                                                                                                             |                      | <b>11. Address ID Information for Authorized Individual (if applicable)*</b>                                                                                                                                                                                                                                                                                                                                                                                                       |                                        |
| 6a. Street Address Mail Is Transferred To <sup>7</sup>                                                                                                                  |                      | 11a. Authorized Individual's Name                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                        |
| 6b. City                                                                                                                                                                |                      | 11b. Authorized Individual's Street Home Address <sup>6</sup>                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        |
| 6c. State                                                                                                                                                               |                      | 11c. City                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                        |
| 6d. ZIP + 4                                                                                                                                                             |                      | 11d. State                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                        |
| 6e. Country                                                                                                                                                             |                      | 11e. ZIP + 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                        |
| 6f. Telephone Number (include area code)                                                                                                                                |                      | 11f. Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                        |
| 6g. Email Address                                                                                                                                                       |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| <b>7. Business/Organization Information</b>                                                                                                                             |                      | 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>3</sup><br><input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy<br><input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card                                                                                                                                 |                                        |
| 7c. Business Street Address <sup>7</sup>                                                                                                                                |                      | <b>12. Exceptions for Additional Recipients of Mail*</b>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |
| 7d. City                                                                                                                                                                |                      | 12a. Signature of Applicant <sup>8</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |
| 7e. State                                                                                                                                                               |                      | 12b. Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                        |
| 7f. ZIP + 4                                                                                                                                                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| 7g. Country                                                                                                                                                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                        |
| 7h. Telephone Number (include area code)                                                                                                                                |                      | 12c. Signature of Witness <sup>9</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                        |
| 7i. Place of Registration <sup>8</sup>                                                                                                                                  |                      | 12d. Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                        |

# Usps Testing Manual

**United States Postal Service**

A red circular graphic with a gradient, appearing as a stylized arrow or a partial circle, located to the right of the United States Postal Service text.

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