

MAILBOX RENTAL AGREEMENT + Form 1583 Confidential

Customer Full Name: _____

This agreement governs the terms and conditions of Ship Easy, LLC "Ship Easy". Ship Easy is not responsible for any services to be performed for any other individuals or entities except named within. Ship Easy services are subscription-based. By electing to purchase Ship Easy services, Client agrees that all information submitted is true, legally valid and accurate, and will use the facilities and services of Ship Easy for legitimate business purposes only.

Term. For address and mail services, the initial term of this agreement shall be 3 ; 6 ; or 12 months. **(Circle one)**. All agreements expire on the last calendar day of the final service month and commence on the date payment is processed. Upon expiration of the initial term, this agreement shall convert to and continue month-to-month until renewed for a longer period, or terminated. Service fees during renewal period may equal the then current listed fees for services. If Client's account is overdue by 2 weeks, Ship Easy reserves the right to stop accepting mail.

Charges. The non-refundable setup fee, monthly fixed costs for the services chosen and applicable taxes are payable when Client signs up for services and subsequently during the term of this agreement. If full payment is not received by the 5th day after it is due, Client will be in Default. A late charge of \$10 will be assessed. Ship Easy may suspend and/or terminate this agreement at any time for such default.

Payment. Cash, check or credit cards are accepted for payment. Client agrees to participate in automatic monthly credit card billing and have their charges processed each month of the agreement. Client authorizes Ship Easy to charge Client's card on file for service fees and any charges incurred by the Client. Client agrees Ship Easy may submit charges for Client's monthly service fee without further authorization from Client, unless Client has terminated this authorization or wishes to change designated card. Amounts paid by an unapproved credit card transaction will be treated as unpaid and place the client in Default. All items are non-refundable, unless approved by general manager.

Address & Mail Services. Ship Easy offers Client use of address for business address and mail services. Client agrees to not use Ship Easy services for any unlawful, illegitimate or fraudulent purpose, or for any purpose prohibited by the United States Postal Service regulations. **Each entity must complete a separate USPS Form 1583, authorizing Ship Easy to accept items.** Should Client wish to have mail forwarded, Client is responsible for any applicable fee, plus the cost of postage. Client agrees that Ship Easy is not liable for any damage to mail or loss of mail during or after mailing to Client or its final destination. Client acknowledges and agrees that Ship Easy is not

responsible for any customs, taxes or fees related to export or import of its packages and shipments.

Client understands it is their responsibility to notify necessary parties of any change of address once this agreement ends. Ship Easy is willing to hold mail that is received after this agreement ends, for up to 3 months. Client may pick up in store, free of charge. Client may elect to have their mail forwarded, which will be done so at an additional cost paid by Client.

Mail Handling. Client elects to have mail:

Held for In-store pick up

OR

Forwarded (Address :)

To:

Address: _____

Forwarded mail will be sent via regular USPS First Class Mail (no tracking), unless other directions are provided by Client and agreed to by Ship Easy. This will be billed to client as additional service.

Lost Key. If Client loses their mailbox key or entry key, a \$15 per key charge will be assessed.

Damage. Ship Easy shall have the right to bill Client for the total cost of repairs, plus 15% to cover Ship Easy administrative costs, for any damage caused by Client, it's guests, associates, agents to Ship Easy facilities, property or equipment. Ship Easy may elect to hold Client wholly responsible for any damage that occurs due to their entry after hours.

Indemnification. Client will defend, indemnify, and hold harmless Ship Easy, its landlord, subsidiaries, affiliates, and the managers, officers, employees, vendors, partners, contractors, or other representatives of each of them and all their successors and assigns with respect to any and all claims, costs, damages, liabilities, expenses and obligations of any kind, arising out of or in connection with your use or misuse of Ship Easy services. Ship Easy retains the right to assume the exclusive defense and control of any claim subject to indemnification and in such cases, Client

agrees to cooperate with Ship Easy to defend such claim. Client may not settle any claim covered by this section without Ship Easy's prior written approval.

Expirations/Cancellation/Termination. Any termination date for this agreement shall fall on the last day of the month after the initial term, unless Client is in default. This agreement may be terminated after the initial term in writing or in-store in person, under these conditions: a) after the initial term by either party, with or without cause, upon giving notice no less than 30 days; b) by Ship Easy at any time, with or without notice, should Client be in default of this agreement.

Notices. Client's notice to terminate can be conducted in-store, in person or via email. Ship Easy's notice to terminate can be conducted in-store, in person or via email.

Disputes and Attorney's Fees. This agreement is interpreted and enforced in accordance with the laws of the state of California, county of Orange. Any disputes related to this agreement may first go to mediation, at Ship Easy's election. The prevailing party to mediation and/or litigation shall recover reasonable attorney fees and court costs.

Accepted and Agreed.

Signature: _____

Print name: _____

Date: _____



Application for Delivery of Mail Through Agent

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

1. Private Mailbox (PMB) Information

1a. Date PMB Opened	1b. Date PMB Closed
---------------------	---------------------

8. Photo ID Information for Applicant⁹

8a. Applicant's Name	8b. Applicant's ID Number
----------------------	---------------------------

2. Commercial Mail Receiving Agency (CMRA) Place of Business Information

2a. Street Address to be Used for Delivery ¹	2b. PMB #
---	-----------

8c. Issuing Entity	8d. Expiration Date on the ID
--------------------	-------------------------------

2c. City	2d. State	2e. ZIP + 4 [®]
----------	-----------	--------------------------

8e. Photo ID type (check one)		
☐ U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁰	☐ Uniformed Service ID	☐ Passport
☐ U.S. Access Card	☐ Matricula Consular	☐ Certificate of Naturalization
☐ U.S. University ID Card	☐ NEXUS Card	☐ U.S. Permanent Resident Card

3. Type of Service Requested

☐ Business/Organization Use ²	☐ Residential/Personal Use ³
---	--

4. Name of Applicant

4a. Last Name	4b. First Name	4c. Middle Initial
---------------	----------------	--------------------

9. Address ID Information for Applicant¹¹

9a. Applicant's Name

4d. Telephone Number (include area code)	4e. Email Address
--	-------------------

9b. Applicant's Street Home Address ¹
--

4f. Applicant's Street Home Address ^{1,4}
--

9c. City	9d. State	9e. ZIP + 4	9f. Country
----------	-----------	-------------	-------------

4g. City	4h. State	4i. ZIP + 4	4j. Country
----------	-----------	-------------	-------------

9g. Address ID type (check one) — Must Contain the Address in 9b–9f			
☐ U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁰	☐ Current Lease	☐ Home or Vehicle Insurance Policy	☐ Mortgage or Deed of Trust
☐ Vehicle Registration Card	☐ Voter Card		

4k. Is applicant a court-ordered protected individual? ☐ Yes ☐ No If "Yes," you must attach a copy of the court order.

5. Authorized Individual⁶

5a. Last Name	5b. First Name	5c. Middle Initial
---------------	----------------	--------------------

10. Photo ID Information for Authorized Individual (if applicable)⁹

10a. Authorized Individual's Name	10b. Authorized Individual's ID Number
-----------------------------------	--

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 ^{1,6}
--

10e. Photo ID type (check one)			
☐ U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹²	☐ 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			

5g. City	5h. State	5i. ZIP + 4	5j. Country
----------	-----------	-------------	-------------

6. If Transferring PMB Mail to Another Address⁷...

6a. Street Address Mail Is Transferred To ¹
--

11. Address ID Information for Authorized Individual (if applicable)¹¹

11a. Authorized Individual's Name

6b. City	6c. State	6d. ZIP + 4	6e. Country
----------	-----------	-------------	-------------

11b. Authorized Individual's Street Home Address ¹

6f. Telephone Number (include area code)	6g. Email Address
--	-------------------

11c. City	11d. State	11e. ZIP + 4	11f. Country
-----------	------------	--------------	--------------

7. Business/Organization Information

7a. Name of Business/Organization	7b. Type of Business
-----------------------------------	----------------------

11g. Address ID type (check one) — Must Contain the Address in 11b–11f			
☐ U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹²	☐ Current Lease	☐ Home or Vehicle Insurance Policy	☐ Mortgage or Deed of Trust
☐ Vehicle Registration Card	☐ Voter Card		

7c. Business Street Address ¹
--

12. Exceptions for Additional Recipients of Mail¹³

7d. City	7e. State	7f. ZIP + 4	7g. Country
----------	-----------	-------------	-------------

13a. Signature of Applicant ¹⁴	13b. Date
---	-----------

7h. Telephone Number (include area code)	7i. Place of Registration ⁸
--	--

14a. Signature of Witness ¹⁵	14b. Date
---	-----------

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 <i>both</i> the Applicant's photo ID <i>and</i> address ID, <i>it may be used for only one of the IDs (either photo ID or address ID)</i> , 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 <i>both</i> the Authorized Individual's photo ID <i>and</i> address ID, <i>it may be used for only one of the IDs (either photo ID or address ID)</i> , 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 witness can be the agent, an authorized employee, or a Notary Public.

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 execute this form in the presence of the agent, his or her authorized employee, or a notary public. 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.

Witness my signature and official seal. Notary Public in and for the STATE OF _____, 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 this application, appeared before me, and did personally sign the application. <i>Signature of Notary Public</i> _____ <i>My commission expires:</i> _____, 20_____ _____	Official Seal:
---	-----------------------