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**Privacy Act Statement:** 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](http://usps.com)®.

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208ADMIN0499

**SBC,LLC MAILBOX LEASE AGREEMENT**

Name of Leasee: \_\_\_\_\_

Company Name: \_\_\_\_\_

Individual Authorized to Act for Company Listed Above      Yes      No      N/A      (circle one)

Term of Lease                      M2M      6M      12M      24M

Pre-paid Amount              \$ \_\_\_\_\_                      Balance Owed      \$ \_\_\_\_\_

**12 Month and 24 Month Lease Terms of Payment:**

50% due at the time of lease signing. Remaining balance billed monthly or quarterly until balance is paid in full. Balance owed must be paid in full prior to 2nd half of the lease term beginning. Failure to pay in full will result in the termination of this lease and SBC, LLC's obligation to accept mail on leasee's behalf.

Preferred billing for remaining balance              monthly              quarterly              (circle one)

Leasee Signiture                      \_\_\_\_\_                      Date                      \_\_\_\_\_

Print Name                      \_\_\_\_\_

Billing Address                      Email                      \_\_\_\_\_  
Physical                      \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Payments Accepted Online at:      <https://www.sbcsmallbusiness.com/>                      and  
by Mail                      SBC, LLC      3214 North Rancho Drive      Las Vegas, NV 89130,                      or pay in person

Please make checks payable to SBC, LLC. Insufficient fund charge on return checks \$40.00

for office use only	Method	Amount	Payment #
1st payment	_____	_____	_____
2nd payment	_____	_____	_____
3rd payment	_____	_____	_____
4th payment	_____	_____	_____
5th payment	_____	_____	_____
6th payment	_____	_____	_____
Notes: _____			
_____			
_____			

## Cancellation of CMRA Agreement

### Mailbox Service Cancellation

SBC, LLC will notify USPS within ten business days of cancellation of service when a customer fails to make a payment by the last day of their mailbox lease agreement, or five business days after the customers gives notice to the CMRA that they wish to cancel the service.

**For a period of six months after cancellation, the customer is responsible** for providing a forwarding address to the Commercial Mail Receiving Agent at SBC, LLC and is required to pay any cost of postage required to forward mail through the USPS when it is delivered to SBC, LLC after the date of cancellation.

If you cannot pick up mail delivered to SBC, LLC after the cancellation, and/or are moving out of the area, the USPS online store provides prepaid postage Priority Mail Envelopes and boxes at [https://store.usps.com/store/results/premium-shipping-supplies/shipping-supplies/ /N-xjeva7Z7d0v8v?C=2&](https://store.usps.com/store/results/premium-shipping-supplies/shipping-supplies/?N-xjeva7Z7d0v8v?C=2&) that you may order and have shipped to SBC, LLC so that all your mail and packages received after the cancellation of service may be forwarded through the USPS to your new address.

Individuals not listed on the original CMRA/ mailbox rental agreement **will not** be allowed to pick up your mail and packages.

If you do not wish to have your mail and packages forwarded to you through USPS after cancellation please specify below how you would like to receive any mail delivered to SBC, LLC after cancellation.

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Signed \_\_\_\_\_ PRINT \_\_\_\_\_

Date \_\_\_\_\_

**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 verification procedures by the Postal Service to confirm that the applicant resides or conducts business at the home or business address listed in boxes 7 or 10, and that the identification listed in box 8 is valid.

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 box.)	3a. Address to be Used for Delivery (Include PMB or # sign.) 3214 North Rancho Drive PMB _____		
	3b. City Las Vegas	3c. State NV	3d. ZIP + 4® 89130-3128

4. Applicant authorizes delivery to and in care of:		
a. Name Small Business Center, LLC dba SBC, LLC		
b. Address (No., street, apt./ste. no.) 3214 North Rancho Drive		
c. City Las Vegas	d. State NV	e. ZIP + 4 89130-3128

5. This authorization is extended to include restricted delivery mail for the undersigned(s):
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 information. Subject to verification.		
a.		
b.		

7b. City Las Vegas	7c. State NV	7d. ZIP + 4
7e. Applicant Telephone Number (Include area code)		
9. Name of Firm or Corporation		
10a. Business Address (No., street, apt./ste. no)		
10b. City	10c. State AL	10d. ZIP + 4
10e. Business Telephone Number (Include area code)		
11. Type of Business		

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.

12. If applicant is a firm, name each member whose mail is to be delivered. (All names listed must have verifiable identification. A guardian must list the names of minors receiving mail at their delivery address.)

13. If a CORPORATION, Give Names and Addresses of Its Officers
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14. If business name (corporation or trade name) has been registered, give name of county and state, and date of registration.
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Warning: The furnishing of false or misleading information on this form or omission of material information may result in criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

15. Signature of Agent/Notary Public
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16. Signature of Applicant (If firm or corporation, application must be signed by officer. Show title.)
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