## **SUBMITTING USPS FORM 1583 STEP-BY-STEP INSTRUCTIONS**



### **United States Postal Service Requirement**

# MyUS must have USPS Form 1583 on file for you to receive mail on your behalf.

The Application for Delivery of Mail Through Agent (Form 1583) demonstrates that MyUS is authorized to receive and forward mail for Premium+Mail members.

- You must submit a separate Form 1583 for each name on your Premium+Mail account.
- Each Form 1583 must be notarized by a notary public, the U.S. Embassy or U.S. Consulate.
- You must submit two (2) photo identifications with each Form 1583.

Acceptable photo identifications include passports, driver licenses, state identification cards, student identifications, government employee IDs, corporate IDs from a place of business, current leases or mortgages, voter registration cards, and home or vehicle insurance policies.



### **United States Postal Service Requirement**

### Submit USPS Form 1583 in just 5 easy steps:

- 1. Download Form 1583
- 2. Complete Form 1583
- 3. Have the completed Form 1583 notarized
- 4. Upload Form 1583
- 5. Mail Form 1583 to MyUS



### **Step 1: Download Form 1583**

OUR SERVICES SHOP SMARTER SHIP GLOBALLY	BLOG   TIPS & FAQ	MY ACCOUNT	ABOUT MyUS	LIVE CHAT
INBOX   OUTBOX   SHIPPING PREFERENCES   HISTOR	Y   PERSONAL SHOP		SETTINGS	
y Alerts				
ou have no alerts	:			
lease select information to change from below				
<ul> <li>My Contact Info (Other phone numbers) Change your contact phone numbers and Email Address</li> </ul>		1		
<ul> <li>My Address Book Manage your list of shipping addresses</li> </ul>				
<ul> <li>My Billing Information Change your credit card or send a wire transfer</li> </ul>				
My Billing Cycle     Change your billing cycle				
My Documents     View or add to your secure document gallery	2			
My Discounts     View any discounts applied to your account				
<ul> <li>My Shipping Preferences</li> <li>View or change your shipping preferences</li> </ul>				
<ul> <li>My Password Change your current password</li> </ul>				

You can find USPS Form 1583 in the "My Documents" section of your account. To access the "My Documents" section, log in to the MyUS website, click "My Account", then click "My Documents".



### **Step 1: Download Form 1583**

OUR SERVICES SHOP SMARTER SHIP GLOBALLY BLOG	TIPS & FAQ	MY ACCOUNT	ABOUT MyUS	LIVE CHAT
INBOX   OUTBOX   SHIPPING PREFERENCES   HISTORY	PERSONAL SHOP	PER ACCOUNT	SETTINGS	
My Documents				
rom here you can upload documents we request (photo identification	, Form 1583) or ot	her images you wis	h to share with us.	
s this secure?				
es, all uploaded documents are held in our secure server, and are or	nly available for vie	ewing when you are	signed in to your acc	count.
Download Form 1583	art -			
» My Form1583 with information already filled				
» Form1583 for each additional name				
» A blank form 1583				
Click on an image to see full size version			Show	w previews (image file
lo documents uploaded yet				
Jpload new document				
Please note: we allow uploading files up to 1 MB (1024 KB) in size. If you attempt to upload a not found" type error from the browser). If you have a very large image file, such as a TIF, to creates a much smaller file.	file larger than 1 MB, yo ry loading it into an image	ou will receive an error me e editing program (e.g. Mi	ssage (or, if the file is <i>really</i> i crosoft Paint) then saving it a	arge you may get a "paa Is a JPG, this typically
1: Select document Choose File no file selected		(image, PDF, o	r Word doc)	
2: Add brief description Form 1583 \$				
B: Click to begin upload Upload document				

Click "My Form 1583" to open the form or download it to your computer. If you have more than one name on your account, click "Form 1583 for each additional name" to browse pre-filled forms for each additional name on your account.



### **Step 2: Complete Form 1583**

### United States Postal Service<sup>®</sup> Application for Delivery of Mail Through Agent See Privacy Act Statement on Reverse

Required

PS Form 1583, December 2004 (Page 1 of 2) (7530-01-000-9365)

Today's Date

. Date

Signature of Applicant

This form on Internet at www.usps.com®

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<sup>TW</sup> 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 addresses(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.

<ol> <li>Name in Which Applicant's Mail Will Be Received for Delivery to Age (Complete a separate PS Form 1583 for EACH applicant, Spouses may</li> </ol>		3b. City 3c. State 3d. ZIP + 4®				
complete and sign one PS Form 1583. Two items of valid identification i to each spouse. Include dissimilar information for either spouse in appr	apply Your US Addres					
box.) Your Name						
Tour Name		FL	34238			
Applicant authorizes delivery to and in care of:	<ol> <li>Inis autoorzation is extended to indu undersigned(s):</li> </ol>	<ol> <li>This authorization is extended to include restricted delivery mail for the undersigned(s):</li> </ol>				
a. Name MyUS.com	Your Name	Your Name				
street, spt/ste.no.) 4299 Express Lane						
Sarasota d State e. ZIP + 4 FL 34238						
5. Name of Applicant	7a. Applicant Home Address (No., stree					
	Your Delivery A					
8. Two types of identification are required. One must contain a photogra he addressee(s). Social Security cards, oredit cards, and birth certific are unacceptable as identification. The agent must write in identifying	ates Your Delivery	/ Addres	7d. ZIP + 4			
information. Subject to verification.	7e. Applicant Telephone Number (Inclusion)	de area code)	1			
a.	Your Teleph     Name of Firm or Corporation	one Nur	nber			
Leave Blank		Company Name (if applicable)				
b	10a Business Address (No. street an	10a. Business Address (No., street.apt/ste.no)				
Leave Blank	Company Ac		f applicable)			
Ecuve Blank	10b. City	10c. State	10d. ZIP + 4			
	Company Ac		f applicable)			
Acceptable identification includes: valid driver's license or state non-driv identification card; armed forces, government, university, or recognized	i lue. Business relepriorie Number (Indi	10e. Business Telephone Number (Include area code)				
corporate identification card; passport, alien registration card or certific naturalization; current lease, mortgage or Deed of Trust; voter or vehicl						
registration card; or a home or vehicle hsurance policy. A photocopy o identification may be retained by agent for verification.	fyour 11. Type of Business	11. Type of Business				
<ol> <li>If applicant is a firm, name each member whose mail is to be delive of minors receiving mail at their delivery address.)</li> </ol>	red. (All names listed must have verifiabé ident	ification. A guar	dian must list the name			
commons receiving main at their derivery address.)						
Name of Each Applicant						
13. If a CORPORATION, Give Names and Addresses of Its Officers	<ol> <li>If business name (corporation or tra name of county and state, and date</li> </ol>		een registered, give			
If a Business,	If a Busines	s,				
Name the Officers	Name the A	Name the Address				
Warning: The furnishing of false or misleading information on this form imprisonment) and/or civil sanctions (including multiple damages and o	or omission of material information may result in divil penalties).	n criminal sanct	ons (including fines an			
15. Signature of Agent/Notary Public	16. Signature of Applicant (If firm or con	poration, applic	ation must be signed			
Provide A	by officer. Show title.)					

We have completed some portions of Form 1583 for you. Simply complete any remaining fields and print the Form 1583.



### Step 3: Have Form 1583 Notarized

### Your USPS Form 1583 must be notarized.

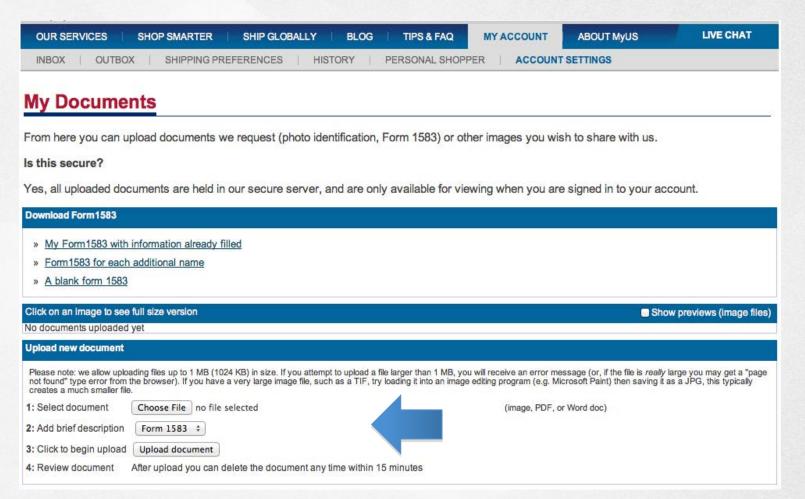
You can have your <u>completed</u> Form 1583 notarized by your local notary public, the U.S. Embassy or a U.S. Consulate. Please have your form notarized <u>before</u> submitting it to MyUS.

## You must submit two (2) forms of photo identification with <u>each</u> completed Form 1583.

Acceptable photo identifications include passports, driver licenses, state identification cards, student identifications, government employee IDs, corporate IDs from a place of business, current leases or mortgages, voter registration cards, and home or vehicle insurance policies.



### Step 4: Upload Form 1583



To upload Form 1583 and supporting documents, select the form or document on your computer and click "Upload Document". *Please note: you must also upload images of your photo identification*.





### Step 5: Mail Form 1583

### Mailing your original Form 1583:

In addition to uploading your completed form(s), you must mail the <u>original</u> notarized Form 1583 to MyUS at:

MyUS.com ATTN: Form 1583 Processing (####) 4299 Express Lane Sarasota, FL 34238 USA

Replace (####) with your suite number.





### **NEED ASSISTANCE?**

Your dedicated account manager is available via email seven days a week. Customer service replies to all emails in the order received.

For fastest service, contact MyUS customer service via live chat between 07:00 and 17:00 EST (GMT -5 hours) Monday through Friday, and between 09:00 and 17:00 on Saturday and Sunday.

