TEMP CARE AGENCY 1724 PALOS VERDES DRIVE NORTH, SUITE F, HARBOR CITY, CA 90710 (424)200-5484

TEMP CARE AGENCY

MAILBOX LAND O LINE RENTAL APPLICATION

WELCOME TO TCA Mailbox Land O Line! The following instructions will guide you through the application process: PRINT OUT THIS FORM AND FILL IT OUT COMPLETELY. YOU MAY BRING IT TO THE OFFICE OR FILL ONE OUT IN THE OFFICE.

- 1. Please complete the CONTACT INFORMATION & MAILBOX PREFERENCE FORM.
- 2. Please read, sign and date the MAILBOX RENTAL AGREEMENT form. Include anyone else you would like authorized to receive mail to your mailbox in the space provided on the second page. Please make note if any are minors. Also, include any business names in which you will be receiving mail. Do not fill in the mailbox number or door code, we will do that once all the paperwork has been received & processed.
- 3. 1583 FORM PLEASE FILL IN THE FOLLOWING NUMBERED SECTIONS: #2, #6, #7a-e. YOUR SIGNATURE IS REQUIRED ON #5 & #16 (#5 allows us to sign on your behalf for mail requiring a signature & #16 authorizes us to receive mail here in your name). A separate 1583 form is also required for each additional adult you wish to have added to your mailbox. Please note minors and businesses are exempt from providing 1583 forms.
- 4. PLEASE HAVE A NOTARY SIGN AND STAMP BOX #15 for all 1583 forms (This step is only necessary if you are not applying in person).
- 5. Please **PROVIDE US WITH A COLOR & NOTARIZED COPY OF 2 FORMS OF ID** for each adult receiving mail to your box. At least one ID must have a photo such as a Driver's license, a State ID card or a Passport. Acceptable IDs include
- a. Valid driver's license or state non-driver's ID card.
- b. Military, government, university, or recognized corporate ID.
- c. Passport, alien registration card, or certificate of naturalization.
- d. Current lease, mortgage, or deed of trust.
- e. Voter or vehicle registration card.
- f. Home or vehicle insurance policy.
- g. Health insurance card

We are not permitted to use credit cards, birth certificates or social security cards as IDs.

PLEASE SUBMIT YOUR FULLY COMPLETED APPLICATION BY MAILING OR BRINGING IT TO US AT:

Temp Care Agency - Attn: Mailbox Application 1724 Palos Verdes Drive North, Suite F

Harbor City, CA 90710.

We recommend using a tracked service such as Priority Mail or FedEx/UPS* If you have any questions please don't hesitate to either call us at **424-200-5484** or email us at **tempcareagency@gmail.com**.

CONTACT INFORMATION & PHYSICAL MAILBOX PREFERENCE

Name:
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2.
Phone Number:
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(A member of the Temp Care Agency Mailbox Land O Line team will call you upon receipt of this application to set you up with your mailbox number.)
Email address:
How would you like to be notified when your packages are ready for pickup?
□ Email
☐ Text
Preferred mailbox size (all sizes may not be available):
☐ Small (\$20/mo.)
☐ Medium (\$25/mo.)
☐ Large (\$35/mo.)
I wish to sign up for a term of:
☐ 3 months (minimum for new mailboxes)
☐ 6 months
☐ 12 months (\$2 discount per month)
There will be a one-time \$10 setup fee

*Month to Month term available after initial set up

To rent a Virtual Mailbox, please visit https://ipostal1.com/TempCareAgency or print out this application and bring it, your two IDs, and your Form 1583 into the office. Important: DO NOT SIGN YOUR <u>FORM 1583</u> UNTIL YOU GET TO THE OFFICE AND HAVE YOUR SIGNATURE WITNESSED BY A TEMP CARE AGENCY TEAM MEMBER.

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MAILBOX RENTAL AGREEMENT	Box #
This Agreement made on (date) by and I	petween
(your name)	, hereinafter referred to as "Applicant,"
and "Temp Care Agency" shall be governed by these t	erms to which each party agrees:

- 1. By completing this form and USPS Form 1583, a copy of which will be made available to the United States Postal Service, applicant appoints Temp Care Agency as agent for the receipt for a period not to exceed that for which rent has been paid in advance. Applicant will pick up mail at least once each month or make other suitable arrangements in advance. Temp Care Agency will provide a lockbox key to applicant. Should applicant provide a key to another person or organization, Temp Care Agency shall assume that possession of the key is evidence of authority to collect mail and packages.
- 2. The key loaned to applicant remains the property of Temp Care Agency, Mailbox Land O Line and shall not be modified by applicant. The applicant shall return the key within ten (10) days of termination of service. Applicant understands that the relationship of the parties hereto is one of bailment and not landlord and tenant.
- 3. Applicant understands that all packages and letters received with tracking information must be processed through the Temp Care Agency, Mailbox Land O Line inventory system and must be signed for by the applicant or individuals authorized by applicant upon receipt. Additionally, Temp Care Agency, Mailbox Land O Line reserves the right to determine that a package or letter without tracking information should also be processed through the inventory system. will not Temp Care Agency, Mailbox Land O Line put these items in the applicant's mailbox regardless of the size of the mailbox or package.
- 4. Once Temp Care Agency, Mailbox Land O Line has placed the applicant's mail or package notice in the assigned mailbox, or Temp Care Agency, Mailbox Land O Line has emailed/texted applicant to notify them that they have received a package, the mail or package shall be deemed to have been delivered, and Temp Care Agency, Mailbox Land O Line shall not be responsible for loss, theft or damage. Temp Care Agency, Mailbox Land O Line is not engaged in the delivery of mail or packages and cannot be responsible for failure of the United States Postal Service or Federal Express to deliver mail or packages or to deliver in a timely fashion or undamaged condition.
- 5. Applicant agrees to use services in accordance with Temp Care Agency, Mailbox Land O Line rules and in compliance with all US Postal regulations, as well as local, state, and federal statutes and regulations. Failure to do so may result in cancellation of service without notice, refund, or mail forwarding. Suspicions of illegal operations being conducted utilizing the Temp Care Agency, Mailbox Land O Line boxes will be reported to the California State's Attorney office.
- 6. Information provided by applicant will be kept confidential and will not knowingly be disclosed without applicant's prior consent, except for law enforcement or postal operation purposes, in which case Temp Care Agency, Mailbox Land O Line intends to cooperate fully. Law enforcement is further clarified to include all city, county, state or federal agencies or their representatives.

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- 7. Mail will not be accepted for more than five (2) persons or organizations in a single lockbox and each recipient must complete a **USPS Form 1583** and provide required identification. Unlimited numbers of immediate family members to the primary applicant may be listed with proper identification provided.
- 8. If applicant consistently requires an overflow bin due to an extremely high volume of mail, or lack of consistent pick up, an overflow bin fee may be assessed. Charges for service are based upon average daily volume and activity. Special circumstances, e.g. high number of parcels, etc. may require assessment of additional fees.
- 9. Applicant agrees that standard size parcels will be retrieved within 1 month of delivery, extra-large or freight parcels will be retrieved within 48 hours of delivery, and perishable parcels within 24 hours of delivery. Monitoring of any perishable parcels is the sole responsibility of the applicant.
- 10. Applicant agrees to protect, indemnify, and hold harmless Temp Care Agency, Mailbox Land O Line from and against any and all claims, demands and causes of action of any nature whatsoever relative to use of Temp Care Agency, Mailbox Land O Line facilities and services.
- 11. Should Temp Care Agency, Mailbox Land O Line commit or fail to commit any act that results in disruption of service and applicant thereby suffers a loss, Temp Care Agency, Mailbox Land O Line's liability shall be limited to not more than the rental fees paid by applicant for service not yet received. Temp Care Agency, Mailbox Land O Line shall not be liable for incidental or consequential damages.
- 12. Per USPS regulations, All Certified, Insured, or C.O.D. Mail or Parcels will be accepted by Temp Care Agency, Mailbox Land O Line on behalf of applicant. Full advance payment of C.O.D. charges must be made to Temp Care Agency, Mailbox Land O Line prior to acceptance of C.O.D. packages.
- 13. Temp Care Agency, Mailbox Land O Line fees are due and payable in advance and notice thereof will be placed in applicant's lockbox. No other notice will be required. Failure to pay such fees when due may result in late fees, disruption, or cancellation of services. Temp Care Agency, Mailbox Land O Line does not prorate fees when services are cancelled. Currently notices are delivered on or about the 20 of the month with payment due on the 1st of the approaching month.
- 14. Payments received will be applied first towards any outstanding House Account Charges and then toward Mailbox Rental Fees and Late Fees.
- 15. Applicant shall use only the address designation of "PMB" to designate their box number. NO OTHER DESIGNATION IS VALID. Specifically excluded is the use of "PO BOX," "SUITE," "DEPT," "APT," or other designators. The US Postal Service may refuse to deliver any piece of mail improperly addressed. Applicant is responsible for notifying correspondents of the above address.
- 16. Upon termination of service by Temp Care Agency, Mailbox Land O Line or failure to pay rent in advance by applicant, Temp Care Agency, Mailbox Land O Line shall not make applicant's mail available without payment theretofore.
- 17. Applicant understands that the US Postal Service will **NOT** forward or return mail without payment and will not accept a "Change of Address" from a private mail center address (businesses such as Temp Care Agency, Mailbox Land O Line.

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18. The applicant's mailbox must remain open and in good standing for the duration of any forwarding required by applicant. For all forwarding requests, the applicant shall provide Temp Care Agency, Mailbox Land O Line with a forwarding address and pay the required fees. No third-party billing or supplied postage will be accepted for postage fees. In the event applicant fails to do this, Temp Care Agency, Mailbox Land O Line shall refuse any further mail and, in the case of mail already received handle such mail in accordance with USPS DMM D042.2.6 regulations. Any mail and packages received for applicant after termination of service will be returned to sender. 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 USPS privacy policies, see the privacy link on usps.com Additional Authorized Recipients: Please Note: The postmaster general requires all persons to fill out a USPS 1583 form to receive mail unless mail is sent to them in care of a mailbox holder who has already filled out the USPS 1583 form. Organizations and children under 18 years of age are the only exceptions to this requirement.

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OUR NAME AND/OR ONE OTHER NAME HAVING ACCESS TO THE MAILBOX OR USE OF IT:
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OR YOUR NAME AND THE NAME OF YOUR BUSINESS THAT WILL BE GETTING MAIL TO YOUR BOX:
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YOUR NEW ADDRESS WILL BE: 1724 Palos Verdes Drive North, Suite F
PMB
Harbor City, CA 90710
Door code:
keys provided:
Signature: Date:

(Please print)