

New USPS 1583 form: What is it and why do I need to fill it out?

The USPS has updated the USPS 1583 form and the process that we use to submit them. Unfortunately, they are also requiring that we receive a new, updated 1583 form for each of our clients. We understand that this is an inconvenience for our customers and we appreciate your assistance with this matter.

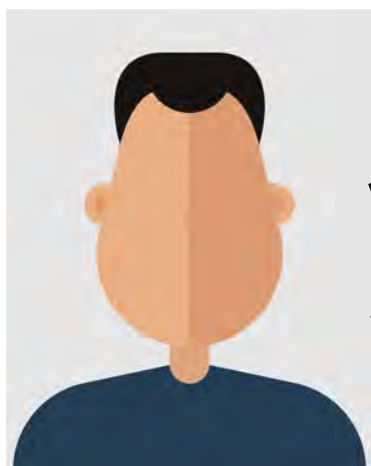
We are required to receive a USPS 1583 form for all adults receiving mail at our 1530 P B Ln, Wichita Falls, TX 76302 address. Each adult will need to fill out a single 1583 form. This means that spouses cannot fill out 1 form together, they will need to fill out separate forms for each person. If you have businesses that use this address, you will need to fill out a single 1583 form for each business name.

In order to use a CMRA (Commercial Mail Receiving Agent) in the US, you are required to fill out this form. If you're unable to complete the form or you do not send us a completed one by March 2024 we will be unable to continue forwarding your mail after your service expires.

Since this is a government form, it can be a little confusing. You will find instructions in this PDF for completing the form and information on the ID requirements. Please feel free to contact us with any questions you may have regarding this process and/or the form. These questions are best answered via email so that we can take time to address all of your concerns. You can email us at either elaine@texashomebase.com or dru@texashomebase.com. However, if you need to call us we answer the phones from 8:30am—2:30pm CST, Monday through Friday. Our phone number is (866) 766-2095 or the local number is (940) 766-2095.

How to Fill Out Your Form Using an Example customer:

In our example, we will follow John Doe who is updating his USPS 1583 form. He will be including a business as well as an “authorized individual” on the form. An “authorized individual” is someone who is authorized to pick up his mail on his behalf. If John was married, his spouse would need to fill out a separate 1583 form and include 2 IDs as well.



John Doe,
current THB customer
and happy traveler




**John's sister,
Jane Doe. She lives
near THB and picks up
his mail occasionally**



**John also has a retail business that
he receives mail for**

John Doe is a current Texas Home Base client and needs to fill out his updated 1583 form. He shares his mailbox with one company and no other adults. However, his sister Jane Doe lives near Wichita Falls and picks up his mail periodically. He will need to fill out one 1583 form for himself that lists his information, his sister's (or the "authorized individual") information and his business information. He will do so in the 3 sections of the form:

Section 1: Client's Information



UNITED STATES
POSTAL SERVICE®

Application for Delivery of Mail Through Agent

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

1. Private Mailbox (PMB) Information		8. Photo ID Information for Applicant ⁸	
1a. Date PMB Opened	1b. Date PMB Closed	8a. Applicant's Name	8b. Applicant's ID Number
		John Doe	AA1234567890
2. Commercial Mail Receiving Agency (CMRA) Place of Business Information		8c. Issuing Entity	
2a. Street Address to be Used for Delivery ¹	2b. PMB #	US Government	8d. Expiration Date on the ID
			DD-MM-YY
2c. City	2d. State	8e. Photo ID type (check one)	
		<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁰	
3. Type of Service Requested		<input type="checkbox"/> Uniformed Service ID	
<input type="checkbox"/> Business/Organization Use ²		<input checked="" type="checkbox"/> Passport	
<input checked="" type="checkbox"/> Residential/Personal Use ³		<input type="checkbox"/> Certificate of Naturalization	
		<input type="checkbox"/> U.S. Access Card	
		<input type="checkbox"/> Matricula Consular	
		<input type="checkbox"/> U.S. Permanent Resident Card	
		<input type="checkbox"/> U.S. University ID Card	
		<input type="checkbox"/> NEXUS Card	
4. Name of Applicant		9. Address ID Information for Applicant ¹¹	
4a. Last Name	4b. First Name	9a. Applicant's Name	
Doe	John	John Doe	
4c. Middle Initial	9b. Applicant's Street Home Address ¹		
	1234 State Street		
4d. Telephone Number (include area code)	4e. Email Address	9c. City	9d. State
555 999-3333	thisisanemail@gmail.com	Anytown	TX
4f. Applicant's Street Home Address ^{1,4}	9e. ZIP + 4	9f. Country	
1234 State Street	98715-2345	USA	
4g. City	4h. State	9g. Address ID type (check one) — Must Contain the Address in 9b-9f	
Anytown	TX	<input checked="" type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁰	
4i. ZIP + 4	4j. Country	<input type="checkbox"/> Current Lease	
98715-2345	USA	<input type="checkbox"/> Home or Vehicle Insurance Policy	
4k. Is applicant a court-ordered protected individual? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Mortgage or Deed of Trust	
If "Yes," you must attach a copy of the court order.		<input type="checkbox"/> Vehicle Registration Card	
		<input type="checkbox"/> Voter Card	

For the 2 forms of required identification he will use his Driver's License and US Passport. At least one ID will need to include a photo of John.

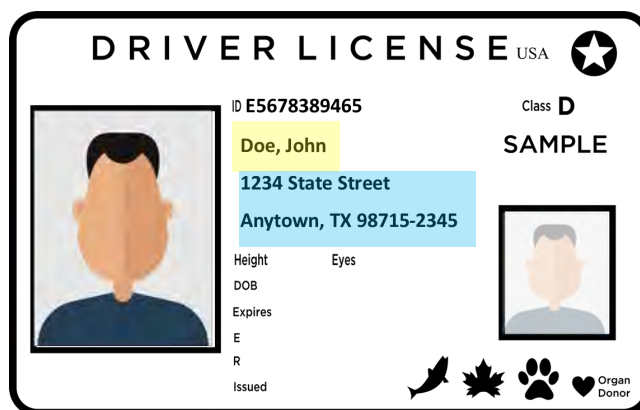


Section 1: Client's Information

4. Name of Applicant			9. Address ID Information for Applicant ^{††}		
4a. Last Name	4b. First Name	4c. Middle initial	9a. Applicant's Name		
Doe	John		John Doe		
4d. Telephone Number (include area code)		4e. Email Address	9b. Applicant's Street Home Address [†]		
555 999-3333		thisisanemail@gmail.com	1234 State Street		
4f. Applicant's Street Home Address ^{†,4}			9c. City	9d. State	9e. ZIP + 4
1234 State Street			Anytown	TX	98715-2345
4g. City	4h. State	4i. ZIP + 4	9f. Country		
Anytown	TX	98715-2345	USA		
4k. Is applicant a court-ordered protected individual? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," you must attach a copy of the court order.					

Boxes 4a-4c & 9a should match the name on John's IDs.

Boxes 4f-4j and 9b-9f should match the address on his ID(s).



John will select the 2 forms of ID he's using in boxes 8e & 9g. He's using his US Passport & U.S. State Driver's License



8e. Photo ID type (check one)		
<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁶	<input checked="" type="checkbox"/> Uniformed Service ID	<input checked="" type="checkbox"/> Passport
<input type="checkbox"/> U.S. Access Card	<input type="checkbox"/> Certificate of Naturalization	<input type="checkbox"/> Matricula Consular
<input type="checkbox"/> U.S. University ID Card	<input type="checkbox"/> NEXUS Card	<input type="checkbox"/> U.S. Permanent Resident Card

9g. Address ID type (check one) — Must Contain the Address in 9b-9f		
<input checked="" type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁶	<input type="checkbox"/> Current Lease	<input type="checkbox"/> Home or Vehicle Insurance Policy
<input type="checkbox"/> Mortgage or Deed of Trust	<input type="checkbox"/> Vehicle Registration Card	<input type="checkbox"/> Voter Card

In boxes 8a-8d, John will input the information from his first ID (or his "photo ID"). This includes the ID number, the issuing entity & the expiration date

8. Photo ID Information for Applicant [†]	
8a. Applicant's Name	8b. Applicant's ID Number
John Doe	AA1234567890
8c. Issuing Entity	8d. Expiration Date on the ID
US Government	DD-MM-YY

John Doe’s sister lives near Wichita Falls and picks up his mail from time to time. He will need to use this form to add her as an “authorized individual” to allow her to do so. She will need to provide 2 types of IDs as well for this form. Section 2 contains boxes 5, 10 & 11. The areas are similar the section 1 but will have Jane’s information included:

Section 2: “Authorized Individual’s” Information

5. Authorized Individual ^f				10. Photo ID Information for Authorized Individual (if applicable) ^g											
5a. Last Name		5b. First Name		5c. Middle Initial		10a. Authorized Individual's Name		10b. Authorized Individual's ID Number							
Doe		Jane				Jane Doe		AA1234567890							
5d. Telephone Number (include area code)				5e. Email Address				10c. Issuing Entity		10d. Expiration Date on the ID					
999 555-7777				thisisalsoanemail@gmail.com				US Government		DD-MM-YY					
5f. Authorized Individual's Street Home Address ^{1,g}						10e. Photo ID type (check one)									
9876 Street Lane						<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹² <input type="checkbox"/> Uniformed Service ID <input checked="" type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card									
5g. City		5h. State		5i. ZIP + 4		5j. Country		11. Address ID Information for Authorized Individual (if applicable) ¹¹							
McTown		NY		12345-6789		USA		11a. Authorized Individual's Name							
								Jane Doe							
								11b. Authorized Individual's Street Home Address ¹							
								9876 Street Lane							
								11c. City		11d. State		11e. ZIP + 4		11f. Country	
								McTown		NY		12345-6789		USA	
11g. Address ID type (check one) — Must Contain the Address in 11b–11f															
<input checked="" type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹² <input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy <input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card															

For the 2 forms of required identification Jane will use her Driver’s License and US Passport. At least one ID will need to include a photo of Jane.



Section 2: “Authorized Individual’s” Information

5. Authorized Individual^f 5a. Last Name Doe				5b. First Name Jane		5c. Middle Initial 		11. Address ID Information for Authorized Individual (if applicable)¹¹ 11a. Authorized Individual's Name Jane Doe			
5d. Telephone Number (include area code) 999 555-7777			5e. Email Address thisisalsoanemail@gmail.com			11b. Authorized Individual's Street Home Address ¹ 9876 Street Lane					
5f. Authorized Individual's Street Home Address ^{1,g} 9876 Street Lane						11c. City McTown		11d. State NY	11e. ZIP + 4 12345-6789	11f. Country USA	
5g. City McTown			5h. State NY	5i. ZIP + 4 12345-6789	5j. Country USA						

Boxes 5a-5c & 11a should match the name on Jane's the IDs.

Boxes 5f-5j and 11b-11f should match the address on her ID(s).

John will select the 2 forms of ID he's using for his sister Jane in boxes 10e & 11g. He's using her US Passport & U.S. State Driver's License

[illegible]

10e. Photo ID type (check one)

<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹²	<input checked="" type="checkbox"/> Passport	<input type="checkbox"/> Certificate of Naturalization
<input type="checkbox"/> Uniformed Service ID	<input type="checkbox"/> Matricula Consular	<input type="checkbox"/> U.S. Permanent Resident Card
<input type="checkbox"/> U.S. Access Card	<input type="checkbox"/> NEXUS Card	
<input type="checkbox"/> U.S. University ID Card		

11g. Address ID type (check one) — Must Contain the Address in 11b-11f

<input checked="" type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹²	<input type="checkbox"/> Home or Vehicle Insurance Policy
<input type="checkbox"/> Current Lease	<input type="checkbox"/> Voter Card
<input type="checkbox"/> Mortgage or Deed of Trust	<input type="checkbox"/> Vehicle Registration Card

In boxes 10a-10d, John will input the information from Jane's first ID (or her "photo ID"). This includes the ID number, the issuing entity & the expiration date

10. Photo ID Information for Authorized Individual (if applicable) ⁹	
10a. Authorized Individual's Name	10b. Authorized Individual's ID Number
Jane Doe	AA1234567890
10c. Issuing Entity	10d. Expiration Date on the ID
US Government	DD-MM-YY

John also has a business that he will receive mail for at his Texas Home Base address. He will need to list the business's information in 7a. If John had 3 other separate businesses, he would need to fill out 3 more 1583 forms and list the separate businesses' information on 7a of each form.

Section 3: Business Info & Signatures

Box 7 includes the business name, business type, the official street address , the phone number and the County & state of registration (or where it's "registered agent" is located)

7. Business/Organization Information			
7a. Name of Business/Organization		7b. Type of Business	
This is a Business		Retail	
7c. Business Street Address ¹			
1234 State Street			
7d. City	7e. State	7f. ZIP + 4	7g. Country
Anytown	TX	98715-2345	USA
7h. Telephone Number (include area code)		7i. Place of Registration ⁸	
555 999-3333		Pop County, TX	

If John had a business partner or a minor child who might also receive mail periodically, he would need to list that information on line 12 "Exceptions for Additional Recipients of Mail"

12. Exceptions for Additional Recipients of Mail¹³

To complete the form, the USPS requires that John signs it in front of a notary or by using an online notary service. John will sign on line 13a and the notary will sign on line 14a.

There is also an optional Notary seal area on the bottom of page 2 if the Notary does not use their own acknowledgement form.

13a. Signature of Applicant¹⁴	13b. Date
John Doe	12/8/2023
14a. Signature of Witness¹⁵	14b. Date
Mrs. Notary Service	12/8/2023

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. Signature of Notary Public _____ My commission expires: _____, 20____	Official Seal:
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Bringing it all together:

To complete the form, John will need to send the original, signed USPS 1583 form along with an image of the 2 forms of ID for himself and the 2 forms of ID he's using for his sister Jane (or the "authorized individual") to Texas Home Base. If he's filled out the form with an ink pen, he will need to send the original form to Texas Home Base, 1530 PB Ln, Wichita Falls, TX 76302. If he's filled out the form digitally and used an online notary, he will need to send the completed digital document along with an image of the 2 forms of ID for himself and the 2 forms of ID he's using for his sister Jane to elaine@texashomebase.com or dru@texashomebase.com.

UNITED STATES POSTAL SERVICE®		Application for Delivery of Mail Through Agent			
See Reverse for Instructions, Definitions, Agreement Terms, and the Privacy Act Statement.					
1. Private Mailbox (PMB) Information		8. Photo ID Information for Applicant*			
1a. Date PMB Opened	1b. Date PMB Closed	8a. Applicant's Name		8b. Applicant's ID Number	
		John Doe		AA1234567890	
2. Commercial Mail Receiving Agency (CMRA) Place of Business Information		8c. Issuing Entity		8d. Expiration Date on the ID	
2a. Street Address to be Used for Delivery ¹		US Government		DD-MM-YY	
2b. PMB #					
2c. City	2d. State	2e. ZIP + 4*		8e. Photo ID type (check one)	
				<input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹² <input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card	
3. Type of Service Requested		9. Address ID Information for Applicant ¹¹			
<input type="checkbox"/> Business/Organization Use* <input checked="" type="checkbox"/> Residential/Personal Use*		9a. Applicant's Name			
4. Name of Applicant		John Doe			
4a. Last Name	4b. First Name	4c. Middle Initial			
Doe	John				
4d. Telephone Number (include area code)		4e. Email Address			
555 999-3333		thisisanemail@gmail.com			
4f. Applicant's Street Home Address ¹⁴		9b. Applicant's Street Home Address ¹¹			
1234 State Street		1234 State Street			
4g. City		4h. State		4i. ZIP + 4	
Anytown		TX		98715-2345	
4j. Country		4k. Is applicant a court-ordered protected individual? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
USA		If "Yes," you must attach a copy of the court order.			
5. Authorized Individual*		10. Photo ID Information for Authorized Individual (if applicable)*			
5a. Last Name	5b. First Name	5c. Middle Initial		10a. Authorized Individual's Name	
Doe	Jane			Jane Doe	
5d. Telephone Number (include area code)	5e. Email Address		10b. Authorized Individual's ID Number		
999 555-7777	thisisalsoanemail@gmail.com		AA1234567890		
5f. Authorized Individual's Street Home Address ¹⁴		10c. Issuing Entity			
9876 Street Lane		US Government			
5g. City		5h. State		5i. ZIP + 4	
McTown		NY		12345-6789	
5j. Country		5k. Address ID type (check one) — Must Contain the Address in 9b-9f			
USA		<input checked="" type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹² <input checked="" type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card			
6. If Transferring PMB Mail to Another Address ⁷ ...		11. Address ID Information for Authorized Individual (if applicable) ¹¹			
6a. Street Address Mail Is Transferred To ¹		11a. Authorized Individual's Name			
		Jane Doe			
6b. City		6c. State		6d. ZIP + 4	
		NY		12345-6789	
6e. Country		6f. Telephone Number (include area code)			
USA		555 999-3333			
6g. Email Address		7. Business/Organization Information			
		7a. Name of Business/Organization			
		This is a Business			
		7b. Type of Business			
		Retail			
7c. Business Street Address ¹		7d. City			
1234 State Street		Anytown			
7e. State		7f. ZIP + 4		7g. Country	
TX		98715-2345		USA	
7h. Telephone Number (include area code)		7i. Place of Registration*			
555 999-3333		Pop County, TX			
		12. Exceptions for Additional Recipients of Mail ¹³			
		13a. Signature of Applicant ¹⁴			
		John Doe			
		13b. Date			
		12/8/2023			
		14a. Signature of Witness ¹⁵			
		Mrs. Notary Service			
		14b. Date			
		12/8/2023			

What if John is Just John?

If John has no one that is authorized to pick up his mail and he has no business, how should he fill out the form? He will fill out boxes 4, 8 & 9 as well as his signature on line 13a. He will complete the same process to send the updated form to Texas Home Base: If he's filled out the form with an ink pen, he will need to send the original form along with a copy of his IDs (or an image sent to dru@texashomebase.com) to Texas Home Base, 1530 PB Ln, Wichita Falls, TX 76302. If he's filled out the form digitally and used an online notary, he will need to send the completed digital document along with an image of the 2 forms of ID for himself and the 2 forms of ID he's using for his sister Jane to elaine@texashomebase.com or dru@texashomebase.com.

UNITED STATES POSTAL SERVICE®		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	
2. Commercial Mail Receiving Agency (CMRA) Place of Business Information 2a. Street Address to be Used for Delivery ¹		2b. PMB #	
2c. City		2d. State	
2e. ZIP + 4 [®]		3. Type of Service Requested <input type="checkbox"/> Business/Organization Use ² <input checked="" type="checkbox"/> Residential/Personal Use ³	
4. Name of Applicant 4a. Last Name Doe		4b. First Name John	
4c. Middle Initial		5. Address ID Information for Applicant⁴ 5a. Applicant's Name John Doe	
4d. Telephone Number (include area code) 555 999-3333		4e. Email Address thisisanemail@gmail.com	
4f. Applicant's Street Home Address ^{1A} 1234 State Street		4g. City Anytown	
4h. State TX		4i. ZIP + 4 98715-2345	
4j. Country USA		6. Photo ID type (check one) <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ^{4A} <input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card	
4k. Is applicant a court-ordered protected individual? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," you must attach a copy of the court order.		7. Address ID type (check one) — Must Contain the Address in 9b-9f <input checked="" type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ^{4A} <input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy <input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card	
5. Authorized Individual⁵ 5a. Last Name		5b. First Name	
5c. Middle Initial		10. Photo ID Information for Authorized Individual (if applicable)⁶ 10a. Authorized Individual's Name	
5d. Telephone Number (include area code)		10b. Authorized Individual's ID Number	
5e. Email Address		10c. Issuing Entity	
5f. Authorized Individual's Street Home Address ^{1A}		10d. Expiration Date on the ID	
5g. City		10e. Photo ID type (check one) <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ^{4A} <input type="checkbox"/> Uniformed Service ID <input type="checkbox"/> Passport <input type="checkbox"/> Certificate of Naturalization <input type="checkbox"/> U.S. Access Card <input type="checkbox"/> Matricula Consular <input type="checkbox"/> U.S. Permanent Resident Card <input type="checkbox"/> U.S. University ID Card <input type="checkbox"/> NEXUS Card	
5h. State		11. Address ID Information for Authorized Individual (if applicable)⁷ 11a. Authorized Individual's Name	
5i. ZIP + 4		11b. Authorized Individual's Street Home Address ¹	
5j. Country		11c. City	
6. If Transferring PMB Mail to Another Address⁸... 6a. Street Address Mail Is Transferred To ¹		11d. State	
6b. City		11e. ZIP + 4	
6c. State		11f. Country	
6d. ZIP + 4		11g. Address ID type (check one) — Must Contain the Address in 11b-11f <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ^{4A} <input type="checkbox"/> Current Lease <input type="checkbox"/> Home or Vehicle Insurance Policy <input type="checkbox"/> Mortgage or Deed of Trust <input type="checkbox"/> Vehicle Registration Card <input type="checkbox"/> Voter Card	
6e. Country		12. Exceptions for Additional Recipients of Mail⁹	
6f. Telephone Number (include area code)		6g. Email Address	
7. Business/Organization Information 7a. Name of Business/Organization		7b. Type of Business	
7c. Business Street Address ¹		13a. Signature of Applicant¹⁰ John Doe	
7d. City		13b. Date 12/8/2023	
7e. State		14. Signature of Witness¹¹ Mrs. Notary Service	
7f. ZIP + 4		14b. Date 12/8/2023	
7g. Country			
7h. Telephone Number (include area code)		7i. Place of Registration ¹²	