



www.LibertyMailTX.com
 512-980-0444 Phone
 512-980-0445 Fax
 libertymailtx@gmail.com

Business Hours:
 Mon-Fri: 9:00am- 5:30pm
 Sat: 10:00am- 2:00pm

YOUR ADDRESS

2082 Hwy 183, Ste. 170 # _____
 Leander, TX 78641

BENEFITS OF OUR MAILBOXES

- A physical street address (not a PO Box)
- Safe and secure storage of mail and packages
- Convenient location with parking
- Package acceptance from Amazon, FedEx, UPS, USPS, DHL and other carriers
- Mail Forwarding
- Personal/Friendly customer service
- Package Notification via Text or Email
- 24 Hour Access

Mailbox Rates	Monthly	3 Months	6 Months	12 Months
Personal 3x5 3 name max, 20 packages/month max	\$22/month	\$60.00 (\$20/month)	\$114.00 (\$19/month)	\$216.00 (\$18/month)
Business 3x5 5 name max, 30 packages/month max	\$25/month	\$69.00 (\$23/month)	\$132.00 (\$22/month)	\$252.00 (\$21/month)
Business Medium 5x7 7 name max, 40 package/month max	\$32/month	\$90.00 (\$30/month)	\$174.00 (\$29/month)	\$336.00 (\$28/month)
Corporate 11X5 9 name max, 50 package/month max	\$40/month	\$114.00 (\$38/month)	\$222.00 (\$37/month)	\$432.00 (\$36/month)

- Processing Fee: \$15.00 (Includes One Mailbox Key)
- 24 Hour access setup: \$10.00
- 24 Hour access monthly Fee: \$7.00



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) <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁰ <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 <input type="checkbox"/> Business/Organization Use ² <input type="checkbox"/> Residential/Personal Use ³				9. Address ID Information for Applicant¹¹ 9a. Applicant's Name											
4. Name of Applicant 4a. Last Name		4b. First Name		4c. Middle Initial		9b. Applicant's Street Home Address ¹									
4d. Telephone Number (include area code)		4e. Email Address				9c. City				9d. State	9e. ZIP + 4	9f. Country			
4f. Applicant's Street Home Address ^{1,4}						9g. Address ID type (check one) — Must Contain the Address in 9b-9f <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card ¹⁰ <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									
4g. City		4h. State	4i. ZIP + 4	4j. Country		10. Photo ID Information for Authorized Individual (if applicable)⁹ 10a. Authorized Individual's Name						10b. Authorized Individual's ID Number			
4k. Is applicant a court-ordered protected individual? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", you must attach a copy of the court order.		5d. Telephone Number (include area code)				5e. Email Address				10c. Issuing Entity		10d. Expiration Date on the ID			
5. Authorized Individual⁵ 5a. Last Name		5b. First Name		5c. Middle Initial		10e. 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									
5d. Telephone Number (include area code)		5f. Authorized Individual's Street Home Address ^{1,6}				11. Address ID Information for Authorized Individual (if applicable)¹¹ 11a. Authorized Individual's Name									
5g. City		5h. State	5i. ZIP + 4	5j. Country		11b. Authorized Individual's Street Home Address ¹									
6. If Transferring PMB Mail to Another Address⁷ 6a. Street Address Mail Is Transferred To ¹				6c. State		6d. ZIP + 4	6e. Country		11c. City				11d. State	11e. ZIP + 4	11f. Country
6b. City		6f. Telephone Number (include area code)				6g. Email Address				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 ¹⁰ <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					
7. Business/Organization Information 7a. Name of Business/Organization				7b. Type of Business				12. Exceptions for Additional Recipients of Mail¹³							
7c. Business Street Address ¹						7d. City						7e. State	7f. ZIP + 4	7g. Country	
7d. City		7e. State				7f. ZIP + 4	7g. Country		13a. Signature of Applicant¹⁴				13b. Date		
7h. Telephone Number (include area code)		7i. Place of Registration ⁸				14a. Signature of CMRA or Authorized Employee¹⁵				14b. Date					

Liberty Mail Center Mailbox Rental Service Agreement

Please initial below that you have read, understand, and agree to all information contained on this page.

_____ All information provided by the customer is confidential and will not be disclosed unless legally mandated.

_____ Possession of a mailbox key is considered to be valid evidence that possessor is authorized to remove mail from your mailbox.

_____ Rent is due on or before the stated date on your billing invoice. A late fee of \$10.00 will be charged for payments after 15 days. In cases where payment is late more than 31 days, we will return the mail the post office, and close the box. Closed boxes become available for assignment to new customers immediately.

_____ There will be a \$10.00 fee to add a name to your box after your application has been processed. There is a package volume allotment depending on your box size. You agree to pay overage fees of \$1.00 per package if you go over your monthly allotment.

_____ Packages must be picked up within 7 days of delivery. You agree to pay storage fees of \$5.00 per week, per package if packages are not picked up within 7 days, or prior arrangements were not made. You agree to remove your mail from your box regularly. You can make a special arrangement with us if you won't be able to pick up your mail.

_____ The information on your application must always be current. Please let any LIBERTY MAIL CENTER employee know of any changes in vital contact information (such as address, telephone number, etc.) as you are responsible for updating the form.

_____ The customer agrees to use the subject mailbox for only lawful purposes and in conformity with applicable federal, state, and local laws.

_____ Should you want to close your account, LIBERTY MAIL CENTER will provide a 30-day grace period to notify correspondents of your change of address. During the 30-day grace period, arrangements can be made to forward your mail, provided payment of the postage and forwarding fees.

Use the following example as a guide for proper addressing:

JOHN DOE
2082 HWY 183, Ste. 170 # _____
Leander, TX 78641

Please print and sign below that you have read, understand, and agree to information presented above.

Name _____ Email _____

Best Contact Number _____

Signature _____ Box Number _____ Date _____