

**Below are the instructions on how to fill out the Commercial Mail Receiving Agency (CMRA) Form**

<b>CMRA 1583 Form Instructions</b>				1. Date Form Was Filled Out	
2. Client's Company Name		3a. Center Street Address			3d. Center Zip
		3b. Center City		3c. Center State	
4.a. Name of Center <b>United Virtual Office</b>		5. Individuals authorized to receive restricted or certified mail.			
4b. Center Address					
4c. Center City	4d. Center State				
6. Clients Personal Name <b>(Must be person on contract)</b>		7a. Client Home Address. <b>(Must match address on one form of ID)</b> <b><i>This CANNOT be a PO BOX Number</i></b>			
<p>8. Two types of identification required.</p> <p><b>Social security cards, credit cards, and birth certificates are <b>**NOT** accepted.</b></b> Acceptable forms are drivers' licenses, state ID cards, armed forces cards, government or corporate identification card, passport, alien registration card or certificate of naturalization, current lease, mortgage, deed of trust, voter or vehicle registration card, home or vehicle insurance policy.</p> <p>You must not only write the type of ID here, but include any identifying information such as drivers' license number on this form. CLEAR photocopies of these ID's must also be submitted and we need to be able to see the photo and information on the ID.</p> <p><b><i>**MUST have two forms of ID for the person who is on the contract, whether they will be receiving mail at the center or not.**</i></b></p>		7b. Client Home City		7c. Home State	7d. Home Zip Code
		7e. Clients Home Phone Number			
		9. Clients Company			
		10a. Clients Business Address <b>(BEFORE signing up with United Virtual Office)</b> <b><i>This CAN be your home address if no previous address was used as a business address. Please DO NOT put the address you are acquiring through our services.</i></b>			
		10b. Client Business City		10c. Business State	10d. Business Zip Code
10e. Clients Business Phone Number					
11. Clients Type of Business					
12. Additional employee names if more than the primary person will be getting mail delivered at the center. <b><u>Two ID's required for ALL listed here.</u></b>					
13. Names of the officers of the clients company. (If a corporation)		14. Clients registered business name, date, & location. (If Applicable)			
15. Signature of Notary Public <b>**REQUIRED**</b>		16. Client Signature <b>(Person on contract. See Section 6 above)</b>			