



**Prime**  
Registered Agent

# USPS Form 1583 Guide

## Step-by-Step Instructions

This guide explains **exactly how to complete USPS Form 1583 correctly** for Prime Registered Agent. It follows the **same section layout and color groupings shown in our sample image**, so you can easily match each step to the form.

Filling out this form incorrectly can cause **mail delays, rejection, or mailbox cancellation**, so please follow these instructions carefully.

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## Before You Start (Important)

- You must submit **TWO original, notarized copies** of USPS Form 1583
- Prime Registered Agent (the CMRA) is required by USPS to retain the originals
- You must provide **two valid forms of ID**:
  - **One Photo ID**
  - **One Address ID**
- Only ID types listed on the USPS form are accepted
- Any change to your information requires a **new Form 1583**
- You must sign the form **in front of a notary**
- The notary must complete **all required notary fields and stamps**



# Prime

Registered Agent

## ORANGE SECTION — Sections 1–2

### (CMRA Information)

Do NOT fill out this section.

- Sections 1 and 2 are completed by **Prime Registered Agent**
- This section contains the CMRA name and mailbox address
- Any changes made here can invalidate the form

→ Leave Sections 1–2 completely blank

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## BLUE SECTION — Section 3

### (Type of Service)

Select **ONE** option:

- **Residential / Personal Use**
- **Business / Organization Use**

⚠ Your selection here controls whether Section 7 must be completed:

- If **Business / Organization Use** is selected → **Section 7 is REQUIRED**
  - If **Residential / Personal Use** is selected → **Section 7 must be left blank**
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# Prime

Registered Agent

## RED SECTION — Sections 4, 8, 9

### (Applicant Information)

This section identifies **YOU**, the individual legally responsible for the mailbox.

#### Section 4 — Applicant Name

- Enter your **full legal name**
- Must match your **Photo ID exactly**

#### Section 8 — Photo ID

- Enter details from your Photo ID
- Must match the Photo ID you submit

#### Section 9 — Address ID

- Enter details from your Address ID
- Address must match your current physical address

- ✓ All IDs must be **valid and unexpired**
  - ✓ Information must match exactly
-



# Prime

Registered Agent

## YELLOW SECTION — Sections 5, 10, 11

### (Authorized Individual – Optional)

This section is **optional**.

Use this section **only** if you want to authorize another person to **physically pick up mail**.

- Authorized Individuals must meet the **same ID requirements as the Applicant**
- This section is **NOT** for adding additional mail recipient names

➡ Most Prime Registered Agent clients **leave this section blank**

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## GREEN SECTION — Section 7

### (Business Information)

Complete this section **ONLY** if:

- You selected **Business / Organization Use** in Section 3, OR
- The mailbox is owned or used by a business (including LLCs)

Enter:

- Full legal business name
- Business address

### Section 7i — Where Is the Business Formed?

- Enter the **County and State** where the business was formed
  - This information is **not public**
-



**Prime**  
Registered Agent

## LIGHT GREEN SECTION — Section 13

### (Applicant Signature)

 **DO NOT SIGN THIS SECTION UNTIL YOU ARE IN FRONT OF A NOTARY**

- Sign Section 13 in the presence of a notary
- Include your title, if applicable
- Signing early will invalidate the form

The notary will:

- Verify your identity
  - Complete the notary fields
  - Apply their notary stamp
- 

### After Completing the Form

1. Print **two copies** of the completed form
  2. Have **both copies notarized**
  3. Include copies of your **Photo ID and Address ID**
  4. Mail both notarized originals to Prime Registered Agent
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### Valid Identification (USPS-Approved)

#### Acceptable Photo IDs

- U.S. Driver's License or State ID
- Any valid passport
- U.S. Permanent Resident Card



# Prime

Registered Agent

- Certificate of Naturalization
- U.S. Uniformed Services ID
- NEXUS Card
- Matricula Consular

✗ Credit cards, Social Security cards, and birth certificates are NOT accepted

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## Acceptable Address IDs

- U.S. Driver's License or State ID (if not used as Photo ID)
- Current lease
- Mortgage or deed of trust
- Home or vehicle insurance policy
- Vehicle registration
- Voter registration card

✗ No other Address IDs are accepted

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## Need Help?

If you are unsure about any section, **contact Prime Registered Agent before submitting your form**. We are happy to help ensure your USPS Form 1583 is completed correctly the first time.

✓ Once approved, your mailbox will be fully compliant and ready for use.



# Prime

## Registered Agent

## USPS Form 1583: Color-Coded Reference Page

**Ignore Section 1**  
This is the section we (CMRA) will fill out.

**Ignore This Area**

**ORANGE: Ignore**

**Mailbox Owner**

Select virtual mailbox organization type.

**BLUE: Service Type**

### Business Information

You can also list the virtual mailbox address if you are running your business from that address.

**Business Details**

**GREEN: Business Info**

**UNITED STATES POSTAL SERVICE®**

**Application for Delivery of Mail Through Agent**

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

<b>1. Private Mailbox (PMB) Information</b> 1a. Date PMB Opened 1b. Date PMB Closed		<b>8. Photo ID Information for Applicant*</b> 8a. Applicant's Name 8b. Applicant's ID Number	
<b>2. Commercial Mail Receiving Agency (CMRA) Place of Business Information</b> 2a. Street Address to be Used for Delivery 2b. PMB #		8c. Issuing Entity 8d. Expiration Date on the ID	
2c. City 2d. State 2e. ZIP + 4®		<b>9. Address ID Information for Applicant*</b> 9a. Applicant's Name 9b. Applicant's Street Home Address	
<b>3. Type of Service Requested</b> <input type="checkbox"/> Business/Organization Use® <input type="checkbox"/> Residential/Personal Use®		9c. City 9d. State 9e. ZIP + 4 9f. Country	
<b>4. Name of Applicant</b> 4a. Last Name 4b. First Name 4c. Middle Initial		<b>10. Photo ID type (check one)</b> <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card® <input type="checkbox"/> Uniformed Services 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	
4d. Telephone Number (include area code) 4e. Email Address		<b>11. Address ID type (check one) — Must Contain the Address in 9b-9f</b> <input type="checkbox"/> U.S. State/Territory/Tribal Driver's or Nondriver's ID Card® <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	
4f. Applicant's Street Home Address¹ 4g. City 4h. State 4i. ZIP + 4 4j. Country		<b>12. Exceptions for Additional Recipients of Mail™</b>	
<b>4k. Is applicant a court-ordered protected individual?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", you must attach a copy of the court order.		<b>13a. Signature of Applicant¹</b> <b>13b. Date</b>	
<b>5. Authorized Individual²</b> 5a. Last Name 5b. First Name 5c. Middle Initial		<b>14a. Signature of CMRA or Authorized Employee³</b> <b>14b. Date</b>	
5d. Telephone Number (include area code) 5e. Email Address			
5f. Authorized Individual's Street Home Address² 5g. City 5h. State 5i. ZIP + 4 5j. Country			
<b>6. If Transferring PMB Mail to Another Address¹</b> 6a. Street Address Mail Is Transferred To 6b. City 6c. State 6d. ZIP + 4 6e. Country			
6f. Telephone Number (include area code) 6g. Email Address			
<b>7. Business/Organization Information</b> 7a. Name of Business/Organization 7b. Type of Business			
7c. Business Street Address¹ 7d. City 7e. State 7f. ZIP + 4 7g. Country			
7h. Telephone Number (include area code) 7i. Place of Registration⁴			

**Your Full Name, Home Address and Contact Details go here.**

**Ownership Details**

**RED: Your Info**

**Authorized Individual (Optional)**

This allows you to authorize another individual to collect mail from the virtual mailbox.

**Authorized Individual**

**YELLOW: Optional**

**Your Signature**

**Signature**

Sign with Notary Present.

PS Form 1583, June 2024 (Page 1 of 2) (7530-01-000-9365)

Direct questions to: Retail, Chief Retail and Delivery Officer at CMRAProgram@usps.gov.  
This form is on the Internet at www.usps.com.®