

Customer instruction form

Recipient operator name: COLT Technologies Ltd.
Customer/Company name:
Account No.:
(As shown on most recent telecommunications bill from donor)
Re: Telephone number(s): (Insert all numbers here - attach additional sheets if required)
By signature of this form, I authorise you to close my account in respect of the above telephone number/s in conjunction with the successful porting of those numbers to another operator.
I understand that this form will be relayed to you by use of electronic or other means.
I confirm that I have the authority to make this instruction.
The information contained in this form may not be used for any purpose other than that for which it is intended.
Print Name:
Contact Number:
Position in Company (if applicable):
Signed Date:/