



Letter of Authorization

Thank you for choosing Skype for Business as your service provider. In order to transfer your current telephone number to Skype for Business we will work with your previous service provider to ensure that your service transferred smoothly.

This form must be completed and supplied to Skype for Business before your phone numbers can be transferred.

Your prior service provider requires this letter as proof that you have explicitly requested and authorized that your service and telephone numbers be transferred to Skype for Business. By filling in the information below, and signing and dating this letter, you provide us with the authorization to initiate the process of transferring your service and telephone numbers to Skype for Business.

IMPORTANT

Please do not submit any service change orders on these phone numbers to your current service provider. Doing so will delay or cancel this transfer. If you are relocating, you must use your current address not your prospective address.

This is to authorize the porting of the above Non-Geographic Number.

I recognize that it is my responsibility to arrange cessation of or changes to any other services provided by the current Communications Provider.

I understand that this information, given to the Gaining Communications Provider to enable the port, may be disclosed to the Losing Communications Provider in connection with porting of the above Non-Geographic Number.

| | |
|-----------------------------------|---|
| To (Carrier or Service Provider): | From (Carrier or Service Provider): |
| Name: | Name: Colt Telecommunications |
| Registered Address: | Registered Address: BEAUFORT HOUSE 15 ST BOTOLPH STREET LONDON, ENGLAND EC3A 7QN |

Customer Details:

NOTE: The Name and Address information of the customer should be either as shown on the most recent bill from the Current Communications Provider for the service associated with the Non-Geographic Number above, or, if there is no such bill, as otherwise known to that Communications Provider

Customer Name:

Account Number:

Address:

Telephone Numbers (To be ported):

Authorizing Signature:

Signatory Name:

Date: