



LETTER OF AUTHORIZATION AND CONSENT FOR EQUIPMENT RECORDS AND NUMBER PORTABILITY

This letters authorizes Voxbone to act on behalf of:

Billing Name of Customer as shown on existing Telephone Company Equipment Record

Customer address as shown on Telephone Equipment Record:

To act as our agent in the matter of: **Local Number Portability**

Number(s) To Port (Ranges accepted):

Preferred porting date (not binding):

Current Voice Carrier:

Current Account Number:

Authorization

Name (Printed):

Title / Position:

Signature:

Date:

VOXBONE SA/NV

Tel: +32 2 808 00 00
Fax: +32 2 808 00 01
VAT BE: 478.928.788

lnp@voxbone.com
www.voxbone.com

Avenue Louise 489
1050, Brussels
Belgium