

TELEPHONE NUMBER PORT APPLICATION

Letter of Authorization

Thank you for choosing to transfer your phone number(s) to Citizens Telecom Solutions. Your current provider requires this letter as proof that you have authorized this transfer. Please carefully read and follow the instructions below to ensure a smooth process in transferring your number(s) to Citizens.

Instructions:

1. Fill in all information on this form using your CURRENT local telephone bill for the number(s) you wish to transfer. This must exactly match the information that your current provider has on record.
2. DO NOT disconnect your current phone line with your current provider. If telephone number is disconnected this will stop the port from being completed. You must have active services until porting is complete and the number is owned by Citizens.
3. Make sure you do not have DSL/internet services or alarm systems on ANY of the numbers that you request to be ported to Citizens. You will lose your DSL/internet service during the transition to Citizens and/or your alarm system may be interrupted. *(Contact your service provider if you are unsure about this step. Citizens is unable to check on this for you).*
4. Provide Citizens a copy of the first page of your most recent telephone bill with this form. This page must show your name, billing and service address, all telephone numbers that you wish to port, and the name of your current provider. *(For your privacy, any credit or balance due may be "blacked out" or otherwise removed).*
5. AFTER the port is completed, it is YOUR responsibility to disconnect any remaining services with your old provider.

By signing this letter, you authorize Citizens or its designated agent to act on your behalf to initiate the process of transferring your telephone numbers from your current local exchange carrier to Citizens. You also authorize Citizens or its designated agent to obtain billing information, customer services records, and other necessary network information from your current provider for the explicit purpose of providing local exchange service through Citizens Network.

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1. Fill out information below regarding your account with your **current** phone service provider.
 2. Return this form with a copy of the first page of your most recent telephone bill.

Account Number: _____ Account Billing Name: _____

Current Carrier: _____ Type of Account (please circle one): Residential Business

If wireless, please provide PIN, TaxID, or last 4 digits of SSN: _____

Service Address: (Must reflect the premise that is on record with your current phone company. This cannot be a PO Box.)

House # and Street: _____

City: _____ State: _____ Zip: _____

Local Number(s) that you are requesting to be ported:

By signing below, I confirm that I am the account owner or administrator and that I am authorized to make changes to the numbers listed above. I also confirm that all information is accurate and that I have checked/have knowledge that no numbers listed above has DSL/internet services or an alarm system associated with it.

Name: _____ Signature: _____

Date: ____ / ____ / ____

Company: _____ Title: _____