Times Telecom
The Trusted Voice in Long Distance

LETTER OF AUTHORIZATION
FOR LOCAL NUMBER PORTABILITY

The Customer hereby authorizes Times Telecom Inc. to act on behalf of the Customer to make changes to the Customer's existing local phone service with respect to Local Number Portability, limited to the number listed below. The Customer hereby authorizes Times Telecom Inc. to port/disconnect the indicated local telephone number from the Customer's existing local phone service provider.

CUSTOMER CONTACT & BILLING INFORMATION			
Account Number			
Telephone Number(s) to be Ported (including 3-digit area code)			
Customer Name		**Customer Name** (as it appears on local phone bill if different)	
Address including unit number, floor (exactly as it appears on your phone bill / Customer Service Record)			
City	**State/Province**	**Postal Code**	**Country**
Times Telecom cannot port a number to a Post Office Box address. If the address on your bill is a P.O. Box, please call or email your current phone company Customer Service department and ask them to provide you the "Service Address" from your Customer Service Record.			
Please note: The name(s), phone number, and address entered above must match the information that appears on your most recent telephone bill from your existing local phone service provider, and must match the subscriber information provided to Times Telecom Inc. This submission will serve as your official letter of authorization to transfer your existing number.			

Customer Authorizations
I, the undersigned, have been advised by Times Telecom Inc. that Local Number Portability may result in a minor disruption in the Customer's Local and/or Long Distance Services. I, the undersigned, have the authority to switch these phone numbers.

Customer Name:	Authorized Signature "I have the authority to bind the customers":
Date:	

If you have any questions, please contact our Customer Service Centre.

TIMES TELECOM CUSTOMER SUPPORT CENTRE
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