



Authorization to Change Preferred Telecommunications Carrier

Please print all information in English

Services Requested: Local Service Local Long Distance Service Local Data Service

Marking the box adjacent to any and each of the Services above is a separate request form, and authorization by, the undersigned Subscriber to YipTel to change the preferred carrier for the marked Service(s).

Subscriber's Name (End User) _____
Must be exactly as it appears on current bill

Subscriber's Address (End User) _____
Must be exactly as it appears on current bill

City (End User) _____ State _____ Zip _____

Current Billing Provider _____ Current Services Provider _____

Billing Provider's Name _____
Must be exactly as it appears on current bill

Billing Provider's Address _____
Must be exactly as it appears on current bill

City _____ State _____ Zip _____
Service Provider (Services may be provided through reseller)

Only the telephone numbers listed below are covered by this Authorization.

Subscriber's Main Telephone Number _____ - _____ - _____

Additional Telephone Numbers	_____ - _____ - _____	_____ - _____ - _____
	_____ - _____ - _____	_____ - _____ - _____
	_____ - _____ - _____	_____ - _____ - _____
	_____ - _____ - _____	_____ - _____ - _____
	_____ - _____ - _____	_____ - _____ - _____
	_____ - _____ - _____	_____ - _____ - _____

Each number ported is subject to a \$5 port charge.

I certify that I am at least 18 years of age. The phone number(s) listed on this Authorization are listed in my name and/or I am authorized to change the preferred carrier for each of the Services requested above. My signature on this form authorizes YipTel to act as my agent to change my current carrier to YipTel for those Services. I understand that I may designate only one primary carrier for each of the Services requested above; that there may be a fee charged to change the Services(s); and that I may consult with the appropriate carrier to determine if a fee applies to this change.

Signature: _____ Date (mm/dd/yy): _____

Printed Name: _____ Title: _____

YipTel (internal use only) Order #: _____ Representative: _____

TN: _____ Date Recvd: _____ Date Processed: _____