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 Cape Coral, FL 33904
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 billing@caller-ip.net

Letter of Agency

Dear Customer,

Thank you for choosing **Caller-IP** as your new service provider. In order to transition listed telephone number(s) we must work with your current service provider, ensuring uninterrupted service and where applicable, the transfer of your telephone numbers.

Your current service provider requires this letter as proof that you have explicitly authorized and requested that your service and current telephone number(s) be transferred to another service provider. By filling in all the information requested below and signing and dating this letter, you provide us with the authorization to initiate the process of transferring your service and telephone number(s), including the acquisition of current billing information and customer service records (CSR). Once ported, you will then be able to use your telephone number(s) with your new service.

Please be advised that porting can take approximately 15-20 business days unless the information below does not match the loosing provider's records. Please ensure the following information is completed accurately to prevent possible delays.

End User Customer Information

Customer Name:		
Service Street Address:		
City:	State:	Zip:
Billing Address if different:		
City:	State:	Zip:
Authorized Person to Request Change:		
Current Service Provider:		

Numbers to Transfer

By signing below, I authorize Caller-IP, or its designated agent, to transfer my service from my current provider, to include the transfer of my existing telephone number(s) for use with local, long distance, Toll Free and private line communication services.

Signature –Please note, a digital copy of your signature must be uploaded in order to complete this request, please sign in the CENTER of the box WITHOUT touching the lines:

Printed Name:	Date:
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