



LETTER OF AGENCY  
FOR LOCAL NUMBER PORTABILITY

The Customer identified below hereby authorizes OLAFE, LLC, and appoints the same as agent 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(s) listed below. The Customer hereby authorizes OLAFE, LLC to port/disconnect the indicated local telephone number(s) from the Customer's existing local phone service provider and specify the carrier for local, intrastate, interstate and international calls.

**CUSTOMER CONTACT & BILLING INFORMATION**

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 ZIP Code	
Current Service Provider	
Current Account Number	
Telephone Number(s) to be Ported (including 3-digit area code)	

OLAFE, LLC 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 OLAFE, LLC. This submission will serve as your official letter of authorization to transfer your existing number(s).

**Customer Authorizations**

I, the undersigned, have been advised by OLAFE, LLC 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 the phone numbers listed above.

Customer Name:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date