

# Letter of Authorization (LOA) – Number Porting

## Customer Information

Business Name: \_\_\_\_\_

Authorized Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Service Address (must match Customer Service Record):

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Billing Telephone Number (BTN): \_\_\_\_\_

Account Number (if available): \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Porting Pin (if required by incumbent provider): \_\_\_\_\_

*(You need contact your current carrier / provider to obtain the porting PIN, if they require one)*

## Number(s) to be Ported

Please port the following telephone  
number(s): \_\_\_\_\_  
\_\_\_\_\_

From my current carrier/provider  
\_\_\_\_\_

To **Bandwidth / Opus1 Development Studio**

## Authorization

I hereby authorize Bandwidth Inc. and its agents to act on my behalf to:

1. Initiate the porting of the above-listed numbers from my current carrier.
2. Obtain and use all necessary account information from my current carrier required to complete the port.
3. Represent me to the current service provider for the sole purpose of porting the numbers to Bandwidth.

I confirm that:

- I am the authorized account holder or have authority to act on behalf of the business listed above.
- The information provided is true and correct and matches the Customer Service Record (CSR) with the losing carrier.
- I authorize the release of this/these number(s) to Bandwidth.

## Signature

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_