Customer Letter of Authority (CLoA)



for the porting of numbers from one provider to another

Current Retailer		New Retailer	
Name		Name	Twilio INC
Address:		Address:	25-28 North Wall Quay, Dublin 1, Dublin, D01h104, Ireland
Contact Email		Contact Email	porting@twilio.com

Site a	ddress to register against numbers	Numbers to be Ported (Geo & non-Geo)		
(Use Continuation sheets for additional numbers and/or sites)				
Building Name / Number Street Name Town/City County Post Code		Example: 020 7123 4567 Example: 0333 041 4450 Please note if you want to port both Geo and Non-Geo numbers, fill in 2 separate LOAs, one for Geo and one for Non-Geo numbers.		
MBN-Main Billing number-If known (Geo only)		Example: 020 7123 0000		

Customer's Company Details (as shown on most recent bill from current provider)				
Company Name				
Billing Address				
Town/City				
County				
Post Code				
Company Registration No.				
Billing Account No. (Non-Geo only)				

Fao my current provider: - This CLoA is to notify you that I (representing the customer shown below) have taken the decision to move my Telephony services to a new Provider and require the numbers associated with those services to be ported across to my chosen new Provider (stated above).

My new Provider is authorised to act on my behalf in this matter & you have my authority to disclose to my new Provider (at their request) any other service or site-specific details they might need to allow this port to proceed (e.g. Site/Billing address post code, DDI number range, Main Billing Number (MBN), etc.).

 $Ir ecognise\ that\ it\ is\ my\ responsibility\ to\ arrange\ the\ cessation\ of,\ or\ changes\ to,\ any\ other\ services\ provided\ by\ my\ current\ Provider.$

Requester's Details						
Signed						
Print Name		Job title				
Date (DD/MM/YYYY)		Email				
Validity	This CLoA is valid for 6 months from the above date					
Page Number	1	OF	2			

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Additional Sites and/or Numbers to be Ported (continuation sheet)					
	Site Address(es)	1011 0112017	Numbers to be Ported		
			(Geo & non-Geo)		
Customer Company Name					
Castomer Company	,				
	Requester	's Details			
Signed					
Print Name		Job title			
Date (DD/MM/YYYY)	This CLOA is valid for 6 months from the	Email			
Validity Page Number	This CLoA is valid for 6 months from th	OF	e2		
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