

FIX – Authorisation Nr.

I would like to change my current supplier and keep my phone number(s)

	company name or name of the legal contact person that	at has the services on
Name	loosing provider side	
	company name or name of the legal contact person that	at has the services on
First name	loosing provider side	1211
Street	address of the company -should be in Swiss	ijoe
ZIP/City		Op Yer.
Current supplier	mandatory	for ord
Expected date:	desired porting date	119 131

Note: In the event of a premature number porting, and/or before expiration of the minimum contract term, I herby agree to pay all outstanding payments to the current provider.

After termination of the minimum contract term; date:

I authorise Colt Technology Services GmbH

- to arrange the porting of the numbers specified below, and
- to cease my existing contract(s) with my current provider. If the existing contract(s) refer(s) to
 other services, the cancellation will only apply to the phone number(s) and have no influence on
 the other services.

This authorisation is considered as a cancellation notice for the contract(s)/specific parts of the contract(s) with my existing telecommunication providers, which are affected by the porting of the numbers specified below.

Analogue access incl. multiple

In case single number, kindly add them here

1	023123123	2	11	16
3	012345324	4	12	17
5	041241244	6	13	18
7		8	14	19
9		10	15	20

I further acknowledge that I read and understand the porting instructions set forth at https://support.twilio.com/hc/en-us/articles/115000781088 and agree to fully comply with them in connection with my porting request.



Analogue access incl. MSN -can be left blank Numbers





DDI/Corporate Access in case of ranges ,this part must be filled in

Main number:	Direct dial in from:	to:
01231300	00	99
		60 0 X
		15 MI

Let the document was signed to the document was signed t The exact date and the time of the porting will be communicated to me by Colt Technology Services GmbH at a later stage. Services provided by my existing supplier will terminate at that

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Name/signature: (please additionally use block letters)

name +company stamp

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