

LETTER OF AGENCY (LOA)

and Customer Service Records (CSR) Request

For each of the telephone numbers listed herein and on Attachment A, I appoint Up North Comm to act as my Agent for the purpose of collecting my account information with my current local telephone carrier or provider (hereinafter "Provider").

By selecting Up North Comm to act as my Agent to research my current services with my current Provider of local telephone service, I am authorizing the change of my local telephone Provider from that/those which I am currently using to Up North Comm. This authorization will expire with written notification only.

LOA Instructions:

- All information on this form MUST be typed and NOT handwritten**
- Only one (1) BTN may be associated with each LOA. If you have additional BTN's, you must submit an LOA for each BTN.
- Please provide a copy of the most recent losing carrier invoice for the BTN listed above (Must include ALL pages). **The information on this LOA MUST match the attached losing carrier invoice.**
- Use Attachment A for listing all telephone numbers associated with this BTN.

Billing Telephone Number (BTN):	
Losing Carrier:	
Losing Carrier Account Number:	

This information MUST match your current invoice and account information

Company Name	
Service Address	
City/State/Zip	
Customer Account Contact	
Title	
Customer Contact Number	

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Attachment A

List all telephone numbers to be ported in the following format with one phone number per space. **Do not add toll free 800 numbers or alarm lines to this LOA.** Use a RESPORG for toll free numbers.

Example: 215-555-1212

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Authorized Signature:	
Print Name : (please print)	
Email Address: (used for LNP updates)	
Date:	