



**LETTER OF AUTHORIZATION AND CONSENT  
FOR EQUIPMENT RECORDS AND NUMBER PORTABILITY**

This letter is to authorize Voxbone to act on behalf of:

*Billing Name of Customer as shown on existing Telephone Company Equipment Record*

*Address of Customer as shown on Telephone Company Equipment Record (local Swedish address)*

To act as our agent in the matter of: **Local Number Portability**

<b><i>Number(s) To Port (Ranges accepted):</i></b>				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<b><i>Current Voice Carrier/Operator:</i></b>
<input type="text"/>

<b><i>Authorization</i></b>
Name (Printed): <input type="text"/>

**VOXBONE SA • AVENUE LOUISE 489 • 1050 BRUXELLES • BELGIUM • TEL: +32 2 808 00 00**

**FAX: +32 2 808 00 01 • INTERNET: [WWW.VOXBONE.COM](http://WWW.VOXBONE.COM) • MAIL: [LNP@voxbone.com](mailto:LNP@voxbone.com)**

**VAT BE 478.928.788 • RPM BRUXELLES**



Social  
Number/Orga  
nization  
Number

Signature:

Date:


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