



ITP LETTER OF AGENCY FORM - Residential

Send completed form to:

Fax: (212) 413-7051

Email: porting@itpVoIP.com

Office use only

Date: _____

ITP Acct #: _____

Customer Name: _____

Company Name (if applicable): _____

Name on Phone Bill: _____

Billing Address: _____

City: _____ **State:** _____ **Zip:** _____

Contact Email: _____

Fax #: _____ **Cell #:** _____

Daytime Phone: _____ **Evening Phone:** _____

Current Carrier: _____

If you are porting numbers from 2 different phone companies, please use a second LOA form.

Billing Telephone Number (BTN): _____

Your main phone number on your Phone Bill.

Please Enter ALL Phone Number(s) You would like to Port. (For porting Toll Free numbers, you must use the Toll Free LOA Form):

Phone Number	Service Address (Where the phone is located. If it is the same, write "same")
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Need more room? Please attach a separate sheet with the additional numbers you would like to port.

Please do not cancel your current phone service until the port is complete.

IMPORTANT FOR DSL CUSTOMERS

Is your current phone number (that you are porting to ITP) the same phone number as your DSL line?	YES	NO
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Porting Process:

When ITP receives this form with a copy of your most recent phone bill, the porting process will begin. This process takes 10 days. Without a copy of your phone bill, we cannot process your port.

Please Check Which of the Following 4 Options You Would Like (not checking a box may delay the process):

- Option 1: You can replace the Phone number that ITP has assigned to you with your current number and your bill will NOT change.**
- Option 2: You can set your current number as a virtual number and have it ring to the ITP phone number that had been assigned to you. This option will cost an additional \$4.99/mo.**
- Option 3: You can set the ITP number that was assigned to you as a virtual number and have it ring to your current number. This option will cost an additional \$4.99/mo.**
- Option 4: You can have your current number as a second line. This option will require you to switch to one of our 2 line plans.**

What name would you like to appear on Caller ID? (Up to 15 characters)

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By signing this form I agree to and understand the following:

1. E911 may not be currently available through my VoIP service provider.
2. ITP cannot guarantee to be able to port my number.
3. I am transferring my current phone number to ITP and it will no longer be active with my current provider depending on the plan I have with my current provider.
4. If I disconnect my phone service with my current provider before my number is ported then it will not be portable to ITP. **DO NOT CANCEL YOUR CURRENT PHONE SERVICE UNTIL ITP INFORMS YOU THAT YOUR PORT HAS COMPLETED.**
5. By submitting this form, I authorize ITP to transfer my telephone service and telephone number from my current provider to ITP.
6. The process of porting my number takes 10 Business days (in rare instances can take up to 30 business days) and I am responsible for notifying ITP of the port if I cancel my ITP phone service at any time before my number is ported.
7. If I am not porting all of the numbers on my phone bill then I must notify my phone company of whether or not they should be disconnected.
8. If porting a Canadian number, a non-refundable US\$50 charge will be applied upon completion.
9. If I email this form and I do not receive an email within 72 hours confirming the receipt of this LOA form then it is my responsibility to contact Customer Support.
10. If I fax this form, then it is my responsibility to confirm the fax was received by calling Customer Service.

_____ **Customer Name (Print)**

_____ **Customer Signature**

_____ **Date**

A copy of your Current Phone Bill (no older than 30 days) MUST be included in order to Process your Request. If it is not, we cannot process your port! Please fax these forms and the copy of your phone bill to 212-413-7051 or email them to porting@itpvoip.com