Customer Letter of Authority (CLoA)

for the porting of numbers from one provider to another

Current Retailer		New Retailer	
Name		Name	
Address:		Address:	
Contact Email		Contact Email	

Site address to register against numbers		Numbers to be Ported (Geo & non-Geo)
(Use Continuation sheets for additional numbers and/or sites)		
Building Name / Number		*Example: 020 7123 4567* *Example: 0333 041 4450*
Street Name		
Town/City		
County		
Post Code		
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.).

I recognise 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	Example: 1	**OF**	Example: 6

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Customer Company Name	

Additional Sites and/or Numbers to be Ported *(continuation sheet)*	
Site Address(es)	***Numbers to be Ported*** *(Geo & non-Geo)*

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	Example: 2	**OF**	Example: 6