

**CUSTOMER CONSENT FOR CHANGE OF
ITFS/UIFN SERVICE PROVIDER**

I select (name of new service provider) to host the ITFS/UIFN numbers below, which were allocated to me. I authorise the new service provider to:

- request and receive routing information from (name of current service provider) about the ITFS/UIFN numbers below allocated to me;
- arrange for calls to my ITFS/UIFN numbers detailed below to be re-addressed to the network of the new service provider;
- request cancellation of existing ITFS/UIFN services provided by my current service provider.

I give this consent *(please tick as appropriate)* :

for myself.

on behalf of a corporate customer. I confirm I have the appropriate power to give these authorisations.

Customer Name :

Customer Address :

The following ITFS/UIFN numbers are to have call re-addressing applied so calls are sent to the network of my new service provider:

Country	ITFS/UIFN number	Current service provider's ref. no/customer no
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I / [or customer's name] agree to continue fulfilling my responsibilities with any service provider who has a contract with me for number(s) covered by this form.

Signature :

Date :

Name :

Title :
(if appropriate)