Letter of Agency Document



Whiz to Coho, Inc. Transfer Existing Number Form - For Questions call 503-647-5957 or Email support@coho.net

A Letter of Agency (LOA) must be completed by the end-user and supplied to Flowroute upon request. The LOA must contain the name and current service address of the end-user and the numbers that will be ported to Flowroute from the end-user's current carrier. The LOA used must comply with FCC regulations and must be dated and signed by the end-user or a person who has the authority to act as a legal agent.

Dear Customer,

Signature: _

Thank you for choosing **Flowroute LLC ("Flowroute")** as your network carrier. As you are aware, you may continue to use your existing telephone number with **Flowroute**. In order to transition your current telephone number to the **Flowroute** network, **Flowroute** must work with your previous service provider to ensure that your service is uninterrupted, and where applicable, to ensure that your number is transferred.

Your prior service provider requires this letter as proof that you have explicitly authorized and requested that your service and current telephone number be transferred to another service provider. By filling in all the information requested below and signing and dating this letter, you provide us with the authorization to initiate the process of transferring your service and telephone number to **Flowroute**. You will then be able to use your old number with the **Flowroute** network

the Flowroute network. Please ensure the following information is completed accurately to prevent possible delays. End-User Name (Business or Residential): Person authorized to make this request if a business: Service Street Address: _____ Suite or Apartment No: _____ _____ State: _____ ZIP Code: _____ City: Current Service Provider: *Note that all Telephone Numbers listed below must be associated with this Name. Beginning Range TN **End Range TN** Billing (main acct) TN for porting TNs 2_____ PLEASE REMOVE ANY FEATURES (i.e., Hunt Group) ASSOCIATED WITH THESE NUMBERS PRIOR TO SUBMITTING THIS LOA, ADDITIONALY, PLEASE DO NOT PLACE ANY NEW SERVICE ORDERS OR DISCONNECTS WITH YOUR CURRENT SERVICE PROVIDER ON THIS ACCOUNT. AS THIS WILL CAUSE A DELAY IN PORTING YOUR NUMBERS. The undersigned hereby certifies that the undersigned is the individual responsible for selecting the telephone service provider for the telephone numbers listed above and is authorized to sign for and obligate Customer and hereby authorizes Flowroute to be the provider for its telephones service as noted below, and its Agent in dealings with any and all other concerned operating companies and/or carriers. As the operating company and/or common carrier, you are hereby released from any and all liability for making pertinent information available to the Agent and for following the Agent's instructions with reference to any changes to or maintenance on Customer's telecommunication service. You may deal directly with the Agent on all matters pertaining to telecommunications service, including C.P.N.I., this letter releases you from all liability in regards to making such information available to this Agent. The Customer intends to _ (referred to as current carrier) to Flowroute. change the provider of local service from _ If you wish to select Flowroute as your new service provider for the telephone number listed on this form, you will need to sign your initials on the three lines below: select _____ (initials) Flowroute as the network carrier for all local calls for this number. select _____ (initials) Flowroute as the network carrier for all intrastate toll calls for this number. (initials) Flowroute as the network carrier for all interstate toll calls and international calls for this number. By signing below, I designate **Flowroute** to transfer my service from my current provider to **Flowroute**. By signing below, I also authorize **Flowroute** to transfer my current telephone number used to provide service so that **Flowroute** may provide its network service to me. By signing below, I also authorize Flowroute to obtain billing information, customer service records, and other information required to provide me with service on the Flowroute network. I understand that I (the undersigned) am responsible for any charges or fees as a result of terminating services with the aforementioned losing carrier. I understand that I may consult with Flowroute as to whether a fee will apply to the change.

Printed End-User Name: ______ Date: _____