



TOLL FREE LETTER OF AUTHORIZATION FORM

INSTRUCTIONS

Dear Valued IGONET Customer!

Please complete, in full, this Letter of Authorization to transfer your current toll free phone number(s) to IGONET's Digital Phone Service. Please fax this form to IGONET with a copy of your most recent phone bill. You may also choose to email or mail a copy to one of the following addresses:

FAX

(208) 248-1837

U.S.A.

IGONET PORTING REQUEST

#115
1133 Bal Harbor Blvd. Suite 1139
Punta Gorda, FL 33950-6574

EMAIL

porting@igonet.com

CANADA

IGONET PORTING REQUEST

1111 Davis Dr. Unit 1
Suite 283
Newmarket. Ontario L3Y 9E5

You must include a copy of your most recent phone bill. Please ensure this bill includes your name, address and the phone number(s) you wish to port.

When filling out the LOA, please use the following information as a guideline:

<u>Toll Free Number:</u>	Enter toll free number(s) that you would like to transfer.
<u>Ring To Number:</u>	Enter the primary phone number of your IGONET account
<u>Area of Service:</u>	Circle the area that you would like to be able to receive toll free calls from. Circle (48) continental states, (50) states, or one circle around (50) Canada
<u>New/Port:</u>	Always circle Port
<u>Switched/Dedicated:</u>	Always circle SWI
<u>Current RESPOG ID:</u>	Name of the carrier who currently provides your toll free number
<u>Holder Name:</u>	Enter the name of the person who is currently on the account bill
<u>Address:</u>	Enter your billing address
<u>Contact Number:</u>	Enter the contact phone number of the account holder
<u>Title:</u>	Enter the position you hold in the company (if applicable)
<u>Check Yes:</u>	Place a checkmark on the line in front of the word "Yes" found at the beginning of the second paragraph below the Holder Information Area.

When a carrier transfer date is set, IGONET will notify you. Once this has occurred, your toll free number you had with your previous carrier will ring on your IGONET digital phone. Please do not cancel your current service at any time during this process; in order to transfer your number it must be an active account. Once the number has been transferred, contact your previous carrier to confirm the status of your account.



TOLL FREE LETTER OF AUTHORIZATION CHECKLIST

All Toll Free LOA documents that are submitted as an email attachment must be in the .JPG, .BMP, .TIF, .DOC or .PDF file format

You must receive your IGONET ATA device and complete the e911 click through at www.myigonet.com to register your account before submitting your LOA to IGONET

All documents must be sent in complete, with the following;

- All forms must be LEGIBLE, COMPLETE, and SIGNED by the person or persons listed on the bill
- There are TWO places on the form for SIGNATURE and DATE
- NAME and ADDRESS on the Toll Free LOA must match the included bill copy exactly
- The DATE entered on the Toll Free LOA must be no more than 30 days old
- ABSOLUTELY NO NOTATIONS or HIGHLIGHTING on the Toll Free LOA.
- ALL NUMBERS TO BE TRASFERRED must be clearly listed in the field(s) provided

Included Copy of Phone Bill and/or Account Summary

- The included bill must have been issued within the Past 30 days
- The NAME and ADDRESS on the included bill must MATCH THE LOA EXACTLY
- Included bill copy MUST list the number(s) to be ported
- ABSOLUTELY NO NOTATIONS, HIGHLIGHTS, MARKINGS, OR ALTERATIONS on the included bill copy



Letter of Authorization for Toll Free Number and Responsible Organization Transfer (cs800)

Responsible Organization ID: RJT01

The undersigned Customer hereby appoints RNK Telecom (RJT01) to act as its authorized agent for all matters pertaining to the toll-free number(s) listed below. This agency includes, without limitation, the ordering or rearrangement of service assignment of primary carrier service requests, disconnection of service and other requests as deemed necessary by RNK Telecom to implement the toll-free services ordered from RNK Telecom.

Toll-Free Number	Ring To Number	Area of Service (circle one)	New/ Port (circle one)	Switched/Dedicated (circle one)
		48 50 Canada	NEW <u>PORT</u>	<u>SWI</u> DED
		48 50 Canada	NEW <u>PORT</u>	<u>SWI</u> DED
		48 50 Canada	NEW <u>PORT</u>	<u>SWI</u> DED
		48 50 Canada	NEW <u>PORT</u>	<u>SWI</u> DED
		48 50 Canada	NEW <u>PORT</u>	<u>SWI</u> DED
		48 50 Canada	NEW <u>PORT</u>	<u>SWI</u> DED

Holder Information	
Current RESPORG ID	
Holder Name	
Address (street #, street name, city, state, zip)	
Contact Number	
Authorized Signature	
Signatory name (printed)	
Title	
Date	

In the course of providing service to you, we will possess certain usage-related information about the quantity, type and destination of telecommunications services for your use. You have a right, and we have a duty, to protect the confidentiality of this information. This information may be useful to tailor our products and services to your needs and to enhance our ability to meet all of your telecommunications needs. With your approval, we will use your usage-related information to offer you other RNK products or services that may satisfy your needs and to respond to your concerns if you have become dissatisfied or cancel any of our services. Of course, your decision will not harm the quality of service RNK provides, and we will honor your choice until you expressly tell us otherwise.

____ Yes, I the undersigned customer hereby authorizes RNK Telecom™ (RJT01) and agents acting on its behalf to: (i) use billing information related to my account to evaluate whether I would benefit from other telecommunications services offered by RNK; and (ii) market such other telecommunications services to me.

By signing this form, the undersigned also acknowledges that if this is a new toll-free (8XX) number, this toll-free (8XX) number will not be assigned to undersigned until the toll-free (8XX) number is actually ringing to the ring-to number listed above. The undersigned further represents, warrants and agrees to indemnify, defend and hold RNK harmless from any damages that may arise from this new toll-free (8XX) number not being available to the undersigned.

Understood and Agreed:

Signature (required)

Date