

Toll Free Letter of Agency

Dear Customer:

Thank you for choosing level 3 Communications, LLC and/or any of its affiliates (“Level 3”) as your service provider. As you are aware, you may continue to use your existing toll-free number/s with Level 3 toll-free (8xx) service in order to transition your current toll-free number/s to Level 3, Level 3 must work with your previous service provider to ensure that your service is uninterrupted, and where applicable, to ensure that your number/s are transferred. If there are currently multiple service providers, a separate LOA must be completed for each provider.

Your prior service provider requires this letter as a proof that you have explicitly authorized and requested that your service and current toll-free number/s 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 toll-free number/s to Level 3. You will then be able to use your old number/s with your new Level 3 toll free (8xx) service.

Please ensure the following information is completed accurately which will help prevent possible delays.

Company name:

****Note that all TN’s listed**

Below must be associated

With this Company Name _____

Street Address:

(Service Address) _____

Suit #: _____

City: _____ State: _____ ZIP CODE: _____

Current Service Provider: _____

If you wish to select **Level 3** as the Service Provider for the toll-free number/s listed below.

I select _____ (initials) **Level 3** as the Service Provider for the toll-free number/s listed below.

Toll Free Number Begin	Toll Free Number End	Provide BTN (Billing Telephone Number) for all ported numbers	Customer Requested Port Date

Level (3)’s RespOrg ID is LVC01.

By signing below I designate **level 3** or its designated agent to transfer my toll-free (8xx) service from my current provider to **Level 3**. By signing below I also authorize **level 3** or its designated agent to transfer my current toll-free number/s used to provide service so that **level 3** may provide its service to me. By signing below, I also authorize **level 3** or its designated agent to obtain billing information, customer service records and other network information required to provide me with **level 3** service. I understand that I may consult **level 3** as to whether a fee will apply to the change.

Print Name: _____ Date: _____

Signature: _____