



Letter of Authorization—Local Number Porting

Account Information

Telephone Number Being Ported:

Any Additional Numbers to be Ported:

Company of Current Phone Number:

Calling Features on Current Number: _____

Account Type: Business

Residential

Authorization Information

Full Name on Billing Account:

Billing Address:

City, State, Zip Code:

Business Name:

Authorized Signature:

Date:

Fax 208-355-2222

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