 Envoi Networks, Inc. |21721 Filigree Court, Suite 2075, Ashburn, VA 20147

[www.envoi.com](http://www.envoi.com/) Phone: 571-620-2500 **|** Fax: 571-620-2510 **|** Email: [info@envoi.com](mailto:info@envoi.com)

**RESPORG Authorization (ID VNI 01)**

**Toll-Free Number Porting Request Form**

**My signature below certifies that I am the customer of record or the authorized representative for payment for each of the toll-free telephone numbers listed below.**

For each of the telephone numbers listed herein and on Attachment A, I appoint Envoi Networks, Inc. (hereinafter “Envoi Networks”) to act as my Agent for the purpose of collecting my account information with my current local telephone carrier or provider (hereinafter “Provider”).

By selecting Envoi Networks to act as my Agent to research my current toll-free services with my current Provider, **I am authorizing** the change of my toll-free Provider from that/those, which I am currently using to Envoi Networks. This authorization will only expire by written notification.

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| --- |
| **Billing Telephone Number (BTN):** |
| **Losing Carrier:** |
| **Losing Carrier Account Number:** |

**RESPORG Instructions:**

1. Only one (1) BTN may be associated with each RESPORG. If you have additional BTN's, you must submit an RESPORG for each BTN. Please contact your Envoi Networks representative if you need assistance identifying each BTN.
2. Please provide a copy of the most recent losing carrier invoice for the BTN listed above (Must include ALL pages). **The information on this RESPORG MUST match the attached losing carrier invoice.**
3. Use Attachment A for listing all telephone numbers associated with this BTN.

**Please Complete The Following Information:**

This information MUST match your current invoice and account information.

|  |  |
| --- | --- |
| **Customer (Company) Name:** |  |
| Service Address: |  |
| City, State, Zip Code: |  |
| Account Contact (Local Contact): |  |
| Title: |  |
| Telephone Number: (your phone #, not BTN) |  |

**Sign and Authorize:**

|  |  |
| --- | --- |
| **Signature:** | Date: |

**Please fill Attachment A for all telephone number ports related to this BTN (Billing Telephone Number) Attachment A**

|  |  |
| --- | --- |
| **Billing Telephone Number (BTN):** |  |

Only one (1) BTN may be associated with each RESPORG. If you have additional BTN's, you must submit a RESPORG for each BTN. Please contact your Envoi Networks representative if you need assistance with identifying the proper BTN.

|  |  |  |
| --- | --- | --- |
| Telephone Numbers **To Be Ported** | Requested Port Date\* | ***Instructions:*** |
| **List telephone numbers here (one per line):** | \_\_\_\_\_\_\_\_\_\_\_\_  Port Date | *The numbers listed in this table WILL be ported. Please clearly indicate the use of each number and if any numbers are associated with DSL line or if a part of a Centrex type service.*  *For example:*  *111-111-1111, Main Number*  *111-222-2222, Fax Number* |

**If you need any assistance or have questions, please do not hesitate to contact our friendly**

**Customer Support by email** [**support@envoi.com**](mailto:support@envoi.com) **or call 877-495-9604 opt. 2**