

Please ensure the following information is completed accurately to prevent possible delays.

LOCAL NUMBER PORTABILITY LOA

A Letter of Agency (LOA) must be completed by the end-user and supplied to DIAMOND VOICE upon request. The LOA must contain the name and current service address of the end-user and the numbers that will be ported to DIAMOND VOICE 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,

Thank you for choosing **Diamond Voice** as your service provider. As you are aware, you may continue to use your existing telephone number with **Diamond Voice**. In order to transition your current telephone number to **Diamond Voice**, **Diamond Voice** 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 **Diamond Voice**. You will then be able to use your old number with **Diamond Voice**.

Person authorized to make this request: Service Street Address: ZIP Code:	End	-User Name:					
Current Service Provider: Use Information above for Directory Listing	Pers	on authorized to make this request	:				
Current Service Provider:	Serv	rice Street Address:					
Use Information above for Directory Listing Directory Listing Company Name: Note that all Telephone Numbers listed below must be associated with this Name. Billing (main acct) TN (if exists) for porting TNs Telephone number to port 1	City:S			State:		ZIP Code:	_
Directory Listing Company Name: Note that all Telephone Numbers listed below must be associated with this Name. Billing (main acct) TN (if exists) for porting TNs Telephone number to port Telephone number to port 1	Curr	ent Service Provider:					
Company Name: *Note that all Telephone Numbers listed below must be associated with this Name. Billing (main acct) TN (if exists) for porting TNs Telephone number to port		Use Information above for Directory Lis	ting	No Directory Listing			
*Note that all Telephone Numbers listed below must be associated with this Name. Telephone number to port	Direc	ctory Listing					
Telephone number to port Telephone number to port Telephone number to port	Com	pany Name:					
Telephone number to port	*Note	that all Telephone Numbers listed below mus	st be as	sociated with this Name.			
Telephone number to port	Rilli	ng (main acct) TN (if exists) fo	or no	rting TNs			
1			J. PO				
2		Telephone number to port		Telephone number to port	-	Telephone number to port	
Use additional page for more numbers 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. CUSTOMERS PORTING FAX NUMBERS ONTO THE SERVICE PLEASE BE ADVISED OF THE FOLLOWING: DIAMOND VOICE WILL SUPPORT MODERATE FAXING HOWEVER FAXING OVER THE CIRCUIT IN A MISSION CRITICAL OR HIGH VOLUME FAX ENVIRONMENT IS NOT RECOMMENDED. — Full Port — Partial Port (Please specify the leave behind billing telephone number for a partial port: — Partial Port (Please specify the leave behind billing telephone number used to provide service so that DIAMOND VOICE may provide network service to me. By signing below, I also authorize DIAMOND VOICE to obtain billing information, customer service records, and other information required to provide service with DIAMOND VOICE. I understand that I may consult with DIAMOND VOICE as to whether a fee will apply to the change. Printed End-User Name: — Date: Date: Date: Dat	1						
Use additional page for more numbers 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. CUSTOMERS PORTING FAX NUMBERS ONTO THE SERVICE PLEASE BE ADVISED OF THE FOLLOWING: DIAMOND VOICE WILL SUPPORT MODERATE FAXING HOWEVER FAXING OVER THE CIRCUIT IN A MISSION CRITICAL OR HIGH VOLUME FAX ENVIRONMENT IS NOT RECOMMENDED. — Full Port — Partial Port (Please specify the leave behind billing telephone number for a partial port:) By signing below, I designate DIAMOND VOICE to transfer my service from my current provider to DIAMOND VOICE. By signing below, I also authorize DIAMOND VOICE to transfer my current telephone number used to provide service so that DIAMOND VOICE may provide network service to me. By signing below, I also authorize DIAMOND VOICE to obtain billing information, customer service records, and other information required to provide service with DIAMOND VOICE. I understand that I may consult with DIAMOND VOICE as to whether a fee will apply to the change. Printed End-User Name: Date:			_		_		
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. CUSTOMERS PORTING FAX NUMBERS ONTO THE SERVICE PLEASE BE ADVISED OF THE FOLLOWING: DIAMOND VOICE WILL SUPPORT MODERATE FAXING HOWEVER FAXING OVER THE CIRCUIT IN A MISSION CRITICAL OR HIGH VOLUME FAX ENVIRONMENT IS NOT RECOMMENDED. — Full Port — Partial Port (Please specify the leave behind billing telephone number for a partial port:) By signing below, I designate DIAMOND VOICE to transfer my service from my current provider to DIAMOND VOICE. By signing below, I also authorize DIAMOND VOICE to transfer my current telephone number used to provide service so that DIAMOND VOICE may provide network service to me. By signing below, I also authorize DIAMOND VOICE to obtain billing information, customer service records, and other information required to provide service with DIAMOND VOICE. I understand that I may consult with DIAMOND VOICE as to whether a fee will apply to the change. Printed End-User Name: Date:		additional page for more numbers	О		9		
Partial Port (Please specify the leave behind billing telephone number for a partial port:	PLEA AS T CUS' MOD	ASE DO NOT PLACE ANY NEW SERV HIS WILL CAUSE A DELAY IN PORTII TOMERS PORTING FAX NUMBERS C PERATE FAXING HOWEVER FAXING (ICE OI NG YO NTO 1	RDÉRS OR DISCONNECTS WITH YO JUR NUMBERS. I'HE SERVICE PLEASE BE ADVISED (UR CU OF TH	IRRENT SERVICE PROVIDER ON THIS ACCOU	JNT,
By signing below, I designate DIAMOND VOICE to transfer my service from my current provider to DIAMOND VOICE . By signing below, I also authorize DIAMOND VOICE to transfer my current telephone number used to provide service so that DIAMOND VOICE may provide network service to me. By signing below, I also authorize DIAMOND VOICE to obtain billing information, customer service records, and other information required to provide service with DIAMOND VOICE . I understand that I may consult with DIAMOND VOICE as to whether a fee will apply to the change. Printed End-User Name:		_ Full Port					
below, I also authorize DIAMOND VOICE to transfer my current telephone number used to provide service so that DIAMOND VOICE may provide network service to me. By signing below, I also authorize DIAMOND VOICE to obtain billing information, customer service records, and other information required to provide service with DIAMOND VOICE . I understand that I may consult with DIAMOND VOICE as to whether a fee will apply to the change. Printed End-User Name: Date:		Partial Port (Please specify the le	ave b	ehind billing telephone number for	a part	ial port:)	
	belo may reco	w, I also authorize DIAMOND VOIC provide network service to me. By rds, and other information required	E to to signing to pro	ransfer my current telephone numb g below, I also authorize DIAMON I vide service with DIAMOND VOIC	er us D VOI	ed to provide service so that DIAMOND VOI CE to obtain billing information, customer se	ervice
Signature:	Printed End-User Name:					Oate:	
	Sigi	nature:					