

Tri-CoGo Standard Letter of Agency Document

A Letter of Agency (LOA) must be completed by the end-user and supplied to Tri-CoGo upon request. The LOA must contain the name and current service address of the end-user and the numbers that will be ported to Tri-CoGo the end-user's current carrier. The LOA used must comply with FCC regulations and must be <u>dated</u> and <u>signed</u> by the end-user or a person who has the authority to act as a legal agent.

Dear Customer,

Thank you for choosing Tri-CoGo, as your network carrier. As you are aware, you may continue to use your existing telephone number with Tri-CoGo. In order to transition your current telephone number to the Tri-CoGo network, Tri-CoGo 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 current provider requires this letter as proof that you have explicitly authorized and requested that your service and current telephone number be transferred to another 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 Tri-CoGo. You will then be able to use your old number with the Tri-CoGo network.

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

End-User Name (Business or Resident	tial):	
Person authorized to make this reques	t if a business:	
Service Street Address:		Suite or Apartment No:
City:	State:	ZIP Code:
Current Service Provider:		
Current Provider Account Number:		
*Note that all Telephone Numbers liste Beginning Range TN 1 2 3	nd Range TN	Billing (main acct) TN for portingTNs
4		
5		
6		

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.

If you wish to select Tri-CoGo as your new service provider for the telephone number listed on this form, you will need to sign your initials on the THREE (3) lines below, as applicable:

I select _____ (initials) Tri-CoGo as the network carrier for all **local calls** for this number.

I select ______ (initials) Tri-CoGo as the network carrier for all **intrastate toll calls** for this number.

I select ______ (initials) Tri-CoGo as the network carrier for all **interstate toll and international calls** for this number.

If you want to receive service on the Tri-CoGo network, you will need to select Tri-CoGo in ALL THREE (3) spaces above. You may not have more than one carrier for each TYPE of service above.

By signing below, I designate Tri-CoGo to transfer my service from my current provider to Tri-CoGo. By signing below, I also authorize Tri-CoGo to transfer my current telephone number used to provide service so that Tri-CoGo may provide its network service to me. By signing below, I also authorize Tri-CoGo to obtain billing information, customer service records, and other information required to provide me with service on the Tri-CoGo network. I understand that I may consult with Tri-CoGo as to whether a fee will apply to the change.

Printed End-User Name:	Date:
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Signature: