

Customer instruction form

To: (Donor operator) _____ Recipient operator name: COLT Technologies Ltd.

Customer/Con	npany name:	
Address:		
Account No.: _		

(As shown on most recent telecommunications bill from donor)

Re: Telephone number(s):

(Insert all numbers here - attach additional sheets if required)

By signature of this form, I authorise you to close my account in respect of the above telephone number/s in conjunction with the successful porting of those numbers to another operator.

I understand that this form will be relayed to you by use of electronic or other means.

I confirm that I have the authority to make this instruction.

The information contained in this form may not be used for any purpose other than that for which it is intended.

Print Name:	
Contact Number:	
Position in Company (if applicable):	
Signed	Date://