

Order Form for change of User/Company's Service (IN) Number

Mr / Mrs / Company:	
Street, House Number:	
Post code, location:	
Contract number from pre	evious provider:
Date:	

* You can find the contract number on the invoice of the previous provider.

Main number

Area Code	Special service prefix (i.e. freephone) Telephone Number*
0	
0	
0	
0	
0	

Number Range

Area Code	Special service prefix (i.e. fre	Telephone Number*								
0		to 📙	1		1	1		1	1	2
		from	Ĩ	Ĩ	Ĩ	1	Ĩ	I	1	

* Tariff information must be included if it is a 1080 or 0900 number.

I hereby allow my current Service Provider to port the number/special service number to my new provider **Colt Technology Services**.....in the given time frame.

By signing the following, this will allow my current Service Provider to share my contact details with my new Service Provider exclusively for the purpose of porting the telephone number(s) to the new Service Provider (**Colt Technology Services**).

Location/Date:		Signature: _	Signature:						
- Order Confirmation C	olt Technology Services	GmbH	Tel.:						
0. (Main contact person:	•	Fax:						
Confirming above date:	Y N Altern	ative date: d	d	mm	у	у	у	у	
If alternative date chosen, p explaining why the date has	5								
		J Ļ							
Contact person from curren	t Service Provider	Teleph Fax	one/						