

## Number Service Provider Porting Form

To be filled in by the customer

Name / Company: \_\_\_\_\_

Street, House number: \_\_\_\_\_

ZIP /City: \_\_\_\_\_

Account number

with donor operator: \_\_\_\_\_

Preferred Date: \_\_\_\_\_

Number(s):

Prefix	Area Code	List of numbers (National format)
0	800	_____
0	800	_____
0	800	_____

I hereby authorize my previous service provider \_\_\_\_\_

to transfer my number/s to **WILDIX EE OÜ** as my new service provider by the preferred date mentioned above.

I authorized **WILDIX EE OÜ** to transmit to my previous service provider the inventory of number/s specified in this order form and to communicate to my previous number provider that I wish to move my number/s inventory away from him. This communication can only be done under the context of a number portability request.

Place /Date: \_\_\_\_\_ Customer Signature: \_\_\_\_\_

*To be filled in by CLASSOUND SA/NV LNP team*

Order confirmation: **WILDIX EE OÜ**

Contact: **WILDIX EE OÜ**

Email: [classound@wildix.com](mailto:classound@wildix.com)

Confirmed date: [ ] yes [ ] no Alternative date \_\_\_\_\_

Justification change of date/Comments: \_\_\_\_\_

Contact previous service provider: \_\_\_\_\_ Phone/Fax \_\_\_\_\_