



Exabar Business Phone Systems
13492 Research Blvd; Suite 120, PMB 116
Austin, TX 78750-2254
512-258-2175, fax 512-367-5711
sales@exabar.com

LETTER OF AUTHORIZATION

I hereby select Exabar Business Phone Systems to be my local exchange provider and to act as our Agent in dealings with our current local exchange telephone company. Exabar Business Phone Systems may place orders for new services, changes to existing services, and request and receive the results of busy/traffic studies. This authorization covers the following locations and lead billing telephone numbers and shall remain in effect until further written notice is provided. I understand that I can have only one local service provider for any one telephone number.

Business Customer name:

Business Customer billing address:

Business Customer physical address:

Name of individual authorized to act for customer:

Telephone number of individual authorized to act for customer:

Main Billing Telephone Number on Account:

I authorize Exabar Business Phone Systems to provide local service to my telephone number(s):

Will this be a partial port?

If yes, remaining telephone numbers will stay active with current provider unless indicated otherwise.

Authorized Signature

I certify that I have read and understand the Letter of Authorization. I further certify that I am at least eighteen years of age, and that I am authorized to change telephone companies for services to the telephone numbers listed above. I authorize Exabar Business Phone Systems to act as my agent to notify my local phone company of my decision to change my current long distance service to Exabar Business Phone Systems service. I understand that my local phone company may charge me a fee to switch long distance carriers. Selection of Exabar Business Phone Systems will apply to the telephone number(s) listed on this form. I agree to the terms and conditions listed at VoxECall.com

Signature: _____

Date: _____

Printed Name: _____

Title: _____

***NOTE: PLEASE ATTACH A RECENT BILL FROM YOUR LOCAL PROVIDER.** The bill must display your name and number, the carrier's name, service address, and account balance.