Letter of Agency (LOA)

This letter authorizes eCourtDate to initiate a port request. All information must be entered exactly as shown on the customer service record (CSR) of the current carrier. In addition to completing this form, you will need to provide a copy of your latest bill/invoice.

Account or Company Name:

From The Customer Service Record (CSR)
Use the Service Address, not the Billing Address (unless they are the same)

Street w/ Number (Required for Toll Free #s):

City:

State/Province:

Zip/Postal Code:

Current Carrier Information

Carrier Name:

Billing Telephone Number (BTN):

Numbers to Be Ported:
Separate with commas. For ranges, use a dash (i.e. 2163215000-2163215999). Please make a note below if you are attaching a separate list of numbers.

Authorized Signature:

Print Name:

Date:

Please Note: For Toll Free numbers the signature is visually compared to what is on file and must match exactly