

Porting Authority Form (PAF)

1. Account Holder

Title	Surname	Given Name(s)
Business Name (if applicable)		ABN

2. Address Details

Unit Number	Street Number	Street Name
Suburb	State	Postcode
E-mail Address	Date of Birth (dd/mm/yyyy)	
Telephone Number	Fax Number	

3. I wish to port the following numbers to Varsity Internet

Phone number	Current Carrier	Current Carrier account number
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()		
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(If more space is required, please complete the attached Schedule 1) OR

I wish to port the following range of Phone numbers to Varsity Internet

First number in range	Last number in range	Current carrier	Current carrier's account number
()	()		

Preferred cutover date (dd/mm/yyyy)	Preferred cutover time

(At least 4 business days from today – if not provided then it is assumed to be required as soon as

possible) I authorise the telephone number/s listed above to be ported to Varsity Internet.

I acknowledge that I am authorised to request the porting of the telephone number(s) listed on this form.

I acknowledge that I have been advised that:

- by porting the telephone number(s) listed on this form, the service associated with that telephone number is disconnected from the existing service provider's network and may result in finalisation of the account for that service;
- by porting the telephone number(s) listed on this form, any DSL/Spectrum Sharing service associated with that telephone number is disconnected and may result in finalisation of the DSL Spectrum Sharing account for that service; and
- Although I have the right to port the telephone number(s), there may be costs and obligations associated with the port which may include early termination fees and porting fees.
- Telephone number must remain active whilst porting it across, if the number is disconnected during the porting process it may result in the port being rejected. You must ONLY disconnect your service once the number has successfully ported over to Varsity Internet. ATA charges: \$68 + \$9.95 Shipping Fee

Signature	*Date

Name

Capacity (circle the appropriate option)

Customer	Agent	Authorised Representative
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By executing this Customer Authority the signatory warrants that they are authorised to sign this Customer Authorisation on the Customer's behalf.

* This Customer Authorisation is valid for 90 calendar days from this date.