

Letter of Authorization for Local Number Porting (LOA)

This letter authorizes RingPlan 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.

For information on how to fill out an LOA, Click Here

rovide me with RingPlan service. I understand that I vith all RingPlan's Terms and Conditions as stated or AUTHORIZED SIGNATURE	PRINT NAME		DATE
		hether a fee will apply to th	e change. Additionally, I agree
By submitting this form, I designate Zray Technologies PingPlan. I also authorize RingPlan or its designated o urther authorize RingPlan or its designated agent to	agent to transfer my current telepho obtain billing information, custome	one number(s) so that Ring er service records, and othe	Plan may provide its service. I r network information required
nformation provided does not match	what your current carrier	has on file.	
Porting numbers usually take approxi	•	•	e up to 4 weeks if the
he losing carrier.		3	
all requested numbers have ported su Customer is solely responsible for the	_		•
MPORTANT: Do NOT cancel your curr	·		
Please make a note below if you are attaching	g a separate list of numbers.		
Separate with commas. For ranges, use a das	sh (i.e. 2163215000- 2163215999).		
LOCAL PHONE NUMBER(S) TO TRA	NSEED		
Zip / Postal			
State / Province			
City			
Suite/ Unit			
Address			
SERVICE ADDRESS Use the Service Address, not the Billing Addre	ess (unless they are the same). T	The address CANNOT be	e a P.O. BOX.
CEDVICE ADDRECC			
PIN (if available)			
Billing Telephone Number (BTN)			
Account Number			
Account / Company Name			
Carrier Name			

Please email completed form with a copy of your latest bill/invoice to pm@ztelco.com. NOTE: Invalid or missing information will result in delays and/or rejected orders