

## LETTER OF AGENCY (LOA)

A signed Letter of Agency (LOA) is required by ECFiber in order to provide service to the end user. This completed LOA must be on file before ECFiber can request information about current services with other providers. ECFiber's Customer Service Record information shall include all terminal numbers, and billing name and address, end user usage and service information and the contact name and address for each end user location designated by the undersigned.

This Letter of Agency gives legal authorization to ECFiber a) to act as your agent to make any and all inquiries necessary for the purpose of obtaining Customer Service Records information, and b) to act as your agent for the purpose of taking any and all actions required (including the removal of any account protection / freezes) to become your LOCAL SERVICE PROVIDER and to implement other services described herein for all your physical services and billing locations as noted on this form including changing your long distance carrier(s). PLEASE ONLY LIST THOSE NUMBERS YOU WISH TO SWITCH.

This authorization does not preclude our ability to act on our own behalf when we deem necessary to do so.

	•	•		•
I,	authorize ECFiber or its authorized designee to review my account			
information.	. assess current service	es and assist in making i	modifications to my acco	ount throughout the
			on to notify all appropri	
				. ,
•	O		o make the necessary ch	· ·
and future s	services without furthe	er permission. ECFiber 1	may obtain any records i	from my local intra-lata
long distanc	e, and / or long distan	ce Telephone Company	necessary so that they m	nav provide these
services to n	, 0		<b>y</b>	T
ser vices to ii				
Sarvica Add	rocc			
Sei vice Auu	11 ess			<del></del>
Main Numb	er to SWITCH			
Other numb	ers to SWITCH			
Current Pho	one Provider			
Current in				
	Authorized Custon	ner Name (Printed)		
	Authorized Custon	ner Signature		
		_		
	Date			