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**LETTER OF AUTHORIZATION AND CONSENT  
FOR EQUIPMENT RECORDS AND ITALIAN NUMBER PORTABILITY**

**This letter is to authorize DIDWW Ireland Limited to act on behalf of:**

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Billing Name of Customer as shown on existing Telephone Company Equipment Record

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Billing Address of Customer as shown on Telephone Company Equipment Record

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Service Address of Customer if different from above

VAT Number:

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Note: Please fill in the VAT number only if you are a VAT registered company

To act as our agent in the matter of: Local Number Portability

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Local Telephone Number(s):


Current Voice Carrier:

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Porting Authorization Code:

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Authorization

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Name (Printed): \_\_\_\_\_

Title/Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(ALL FIELDS REQUIRED)