



Power of Attorney

for the transfer of one or more mobile phone numbers

	Contracting party	Owner at the current provider
Company name	_____	_____
Last Name	_____	_____
First name	_____	_____
Street / No.	_____	_____
Other address info	_____	_____
ZIP / City	_____	_____

Current provider Swisscom Mobile Salt Sunrise Other: _____

I wish to change my telecommunications services provider and keep my mobile phone number(s)

I wish to respect the contract duration with my current mobile operator.
 (The transfer may be requested no more than 270 days before the expiration of the contract.)
 Contract expiry date: _____

I wish to leave my current provider without respecting the full contract duration and I accept having to pay any costs that this anticipated termination may incur.
 Request transfer date: _____

I wish to transfer the following number(s)	Phone* (must be completed)	Prepaid Number**
	1 _____	<input type="checkbox"/> Yes
	2 _____	<input type="checkbox"/> Yes
	3 _____	<input type="checkbox"/> Yes
	4 _____	<input type="checkbox"/> Yes
	5 _____	<input type="checkbox"/> Yes
	6 _____	<input type="checkbox"/> Yes

* In the case of companies, please include the list of numbers to be transferred with the names of the users.
 ** If you wish to transfer a Prepaid number to a Postpaid subscription, send an SMS with YES to 499.
 The exact date and time of the transfer will be communicated subsequently by TalkTalk. The supply of services from my current provider will terminate on that date.

I acknowledge that this Power of Attorney serves to cancel my subscription with my current provider. Furthermore, I acknowledge that TalkTalk Ltd. cannot be held responsible in the event of my current provider refusing to accept the transfer of the said number(s).

I authorise TalkTalk Ltd.:

- to undertake the transfer from my current provider of the number(s) indicated above and (or) on the attached sheet and
- to cancel my corresponding current contract(s). If the contract includes other services, the cancellation shall only apply to the part of the contract dealing with the number(s) indicated.

Authorized signatories (print in capitals) of the current number owner

Last name, first name _____

Signature _____

Place, date _____