



Power of Attorney for the transfer of one or more mobilephone numbers

Power of Attorney no

Company name

Last name

First name

Address (street no. postcode city)

Current provider

Email

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

- I wish to respect the contract duration with my current mobile operator. The transfer request must be made no more than 120 days before the contract expiry date.

Contract expiry date

- I wish to leave my current provider without respecting the full contract duration and I agree to bear any costs that this anticipated termination may incur.

Requested transfer date

I wish to transfer the following number(s):

	phone* (must be completed)	*Prepaid Nb*	Fax**	Data***	Provisional Nb
1		<input type="checkbox"/>			
2		<input type="checkbox"/>			
3		<input type="checkbox"/>			
4		<input type="checkbox"/>			
5		<input type="checkbox"/>			
6		<input type="checkbox"/>			

*For companies, please include the list of numbers to be transferred with the names of the users, along with fax and data numbers.

**If you wish to transfer a prepaid number to a postpaid subscription, please confirm your request by entering the prepaid transfer code of your current provider into your mobile phone. This code can be obtained from the customer services department of your current provider.

***The transfer of fax and (or) data numbers must take place at the same time as the transfer of the mobile phone number. Subsequent transfer of fax and data numbers is not possible.

The exact date and time of the transfer will be communicated subsequently by Lycamobile.
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 Lycamobile cannot be held responsible in the event of my current provider refusing to accept the transfer of the said number(s).

I authorise Lycamobile: - to undertake the transfer from my current provider of the number(s) indicated above and (or) on the attached sheet to cancel the relevant existing 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.

Authorised signatories (print in capitals)

Place and date

Last name and first name
(private or business customer)

Signature _____

Last name and first name

Signature _____

(joint signature for business customers or legal representative; e.g. in the case persons under 18)

For registration and transfer of existing mobile number, the Terms and Conditions of Lycamobile SIM and Recharge vouchers apply. Please FAX this form to:

0800 006 006