



Hardware Takeover Authorization

DATE OF DECLARATION: _____

EXISTING CUSTOMER'S NAME: _____

SERVICE ADDRESS: _____

TELEPHONE NUMBER: _____

NEW MAILING ADDRESS _____

SERVICE BEING TAKEN OVER: _____

I, _____ give permission to _____

to take over my _____ service(s).

SIGNED: _____

SIGNED: _____

New Customer Information

NAME: _____

TELEPHONE NUMBER: _____ CONTACT NUMBER: _____

ID NUMBER: _____ ID NUMBER _____

ID: birth date, driver's license #, health card #, student ID, etc ...

New customer is required to contact EastLink to finalize transfer. If new customer has not been contacted by, or made contact with EastLink within 30 days, services will be terminated.