Print

Letter of Authority / Toll Free Only Form
Phone: (800) 499-5912
Fax: (888) 311-4202

Requested Toll-Free Number(s):

POTS / Ring to Number: _____

Customer Information:

Billing Name Contact Name Contact Phone Number

Address

City State Zip

Email Address

Rates Product Code____

IntERstate Rate: _____ ¢ / min
IntRAstate Rate: _____ ¢ / min

Paperless/E-Billing Invoice Option ☐ **YES**

- Receive invoice online via EMAIL, and no longer receive invoice via US MAIL

Authorizations: I authorize Telecom Management Group, Inc., DBA UniTel, DBA Global UniTel to act on our behalf in procuring the toll-free phone lines requested herein at the rates provided above with any telephone carrier necessary to implement this order. Customer shall be billed on a monthly basis, and pay the invoice by the due date stated. If invoice is not paid by due date, customer agrees to pay $5.00 or the maximum lawful rate under applicable State Law. A $0.79 Toll Free Fee may apply to each number. A $2.99 service fee will be charged to accounts that fall below $20.00 in current usage in any given month, unless Customer selects Paperless Statement/E-billing invoice option in which case this fee is reduced to $1.99. A twenty-five dollar ($25.00) fee will be charged to accounts whose service is disconnected for non-payment, or whose balance becomes 60 days past due. All calls received on a toll free number are the responsibility of the Customer and not the Company. This authorization shall remain in effect until further written notice. UniTel reserves the right to designate or assign this Service Agreement to any subsequent providers or to any other carriers providing service and changing underlying carriers. Read, understood, and authorized by:

Authorized Signature – Title Federal ID# (business) / DOB (residential)

Printed Name Date

Agent Name Rep #