



## 800 Resporq Authorization

Resporq ID: PKC0

| CUSTOMER INFORMATION  |                                  |
|---|----------------------------------|
| Company Name:   | Contact Name:                    |
| Company Address:  | Contact Phone:                   |
| City: MIAMI State:  | Contact Email:                   |
| Phone: - -  | Current Resporq:                 |
| <input checked="" type="checkbox"/> <b>Change RESPORQ To:</b><br><b>PAETEC Communications, Inc.</b> | <input type="checkbox"/> New 8YY |

| AGENT INFORMATION |                        |
|-------------------|------------------------|
| Sales Agent Name: | Sales Agent Phone: - - |
| Sales ID:         | Account Manager:       |

| APPLICABLE TOLL FREE NUMBERS AND INFORMATION |                |   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|--|----------------|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Set up at cutover <input type="checkbox"/>   |                | Check all that apply<br>Must provide details for Features indicated (*) in Remarks. |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| TOLL-FREE NUMBER                             | RING TO NUMBER | SWITCHED  | DEDICATED                | US                       | CAN                      | US VIRGIN ISLANDS        | BLOCKING*                | PT. OF ORIGIN ROUTING*   | PT. IN TIME ROUTING      | % CALL ALLOC ROUTING     | DNIS*                    | ANI FORWARDING*          | DIRECTORY ASST.          | OVERFLOW/IDTO*           | PINSERVICE*              | COCOT BLOCKING           |
| - -  | - -            | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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Separate form attached for additional numbers

Remarks:

| CUSTOMER AUTHORIZATION  |   |
|---|---|
| <p style="text-align: center;"><b><u>APPOINTMENT OF AGENT</u></b></p> <p>The undersigned customer ("Customer") hereby appoints PAETEC Communications, Inc. ("PAETEC") to act as its authorized agent for all matters pertaining to the 8YY services listed below. This agency includes, the ordering of rearrangement of services, assignment to primary carrier services requests, disconnection of service and other requests as deemed necessary by PAETEC to implement the 8YY services ordered from PAETEC and itemized on Customer's Service Order Form(s) and associated attachments. This authorization will expire upon written notification only.</p> | <p style="text-align: center;"><b><u>Accepted by Customer</u></b></p> <p>Signature: _____</p> <p>Title: _____</p> <p>Print Name: _____</p> <p>Date: _____</p> |

**APPLICABLE TOLL FREE NUMBERS AND INFORMATION**

| Set up at cutover <input type="checkbox"/> |                | Check all that apply<br>Must provide details for Features indicated (*) in Remarks. |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
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Additional Remarks: