

Yellowknife Letter of Agency / 911 Address Form

Customer Name _____

This Letter of Agency authorizes Yellowknife Company, LLC to act as our Communications Representative and Agent. We authorize Yellowknife Wireless Company, LLC and its communications partner BendTel, Inc. to obtain information and/or copies of all our network services, configurations, features, and listings. and to order and manage all negotiations for the installation of telecommunications service for the below listed address and telephone number(s). This authorization shall remain in effect until canceled by us in writing. This Letter of Agency rescinds all other Letters of Agency previously in force.

I hereby agree to notify Yellowknife in writing of any change of address by completing a new 911 Address Form. I understand that I must do this in order for Yellowknife to associate my address with this phone number.

Initial: _____

Phone Number: 541-_____-_____
 Native# Port - Acct # _____

Pin # _____

Street Name: _____

County: _____ **City:** _____ **Zip Code:** _____

I hereby agree that 911 services are provided on a "best effort" basis. I understand that Internet based phone service is subject to outages that may not affect wired phone users. I understand that 911 service may not be available in the event of a power outage or network failure. I agree to indemnify and hold harmless Yellowknife Wireless Company, LLC and any of its subcontractors in the event that 911 service is unavailable for any reason. **Initial:** _____

Caller ID (15 Letters Max): _____

Call Waiting: Yes No

4 Number Voicemail Password? Yes ____ ____ ____ ____ No

Form must be completely filled out, initialed and signed to be accepted by Yellowknife.

Your signature indicates your full understanding and acceptance of the terms of this contract.

Print Name: _____

Signature: _____

Date Signed: _____

YELLOWKNIFE OFFICE USE ONLY

Yellowknife LOA/911

Number Port	Date	Initials		
Submitted			Due Date	
Completed				