



**QCC RespOrg - Domestic Toll-Free Number
(Responsible Organization Change Form)**
Revised: 06/18/07

CUSTOMER INFORMATION		
Account ID:	Sales Rep Sales ID:	Sales Rep CUID:
Order Sign Date	Orion/CORE Order #:	
Product Info:	Product Account ID:	
Type of Change: <input type="checkbox"/> New <input type="checkbox"/> Add to Account <input type="checkbox"/> Admin. Change <input type="checkbox"/> Partial Disconnect		

Leave the top section blank – Qwest/CenturyLink will complete this portion.

Letter of Agency

The undersigned hereby authorizes Qwest Communications Corporation (QCC) to act as the Responsible Organization ("RESPORG") for the following toll-free (8XX) numbers. The undersigned understands that this authorization is in accordance with all applicable Qwest state and federal tariffs (currently, Qwest Tariffs No. 2 and No. 3) and any accompanying terms and conditions therein.

Toll-Free Number	Current RespOrg ID	New RespOrg ID	Ring-to Number	Area of Service	New/Port	Switched/Dedicated
		LGT01		<input type="checkbox"/> 48 <input type="checkbox"/> 50 <input type="checkbox"/> Canada <input type="checkbox"/> VI/PR <input type="checkbox"/> International	<input type="checkbox"/> New <input type="checkbox"/> Port	<input type="checkbox"/> SWI <input type="checkbox"/> DED
		LGT01		<input type="checkbox"/> 48 <input type="checkbox"/> 50 <input type="checkbox"/> Canada <input type="checkbox"/> VI/PR <input type="checkbox"/> International	<input type="checkbox"/> New <input type="checkbox"/> Port	<input type="checkbox"/> SWI <input type="checkbox"/> DED
		LGT01		<input type="checkbox"/> 48 <input type="checkbox"/> 50 <input type="checkbox"/> Canada <input type="checkbox"/> VI/PR <input type="checkbox"/> International	<input type="checkbox"/> New <input type="checkbox"/> Port	<input type="checkbox"/> SWI <input type="checkbox"/> DED
		LGT01		<input type="checkbox"/> 48 <input type="checkbox"/> 50 <input type="checkbox"/> Canada <input type="checkbox"/> VI/PR <input type="checkbox"/> International	<input type="checkbox"/> New <input type="checkbox"/> Port	<input type="checkbox"/> SWI <input type="checkbox"/> DED
		LGT01		<input type="checkbox"/> 48 <input type="checkbox"/> 50 <input type="checkbox"/> Canada <input type="checkbox"/> VI/PR <input type="checkbox"/> International	<input type="checkbox"/> New <input type="checkbox"/> Port	<input type="checkbox"/> SWI <input type="checkbox"/> DED
		LGT01		<input type="checkbox"/> 48 <input type="checkbox"/> 50 <input type="checkbox"/> Canada <input type="checkbox"/> VI/PR <input type="checkbox"/> International	<input type="checkbox"/> New <input type="checkbox"/> Port	<input type="checkbox"/> SWI <input type="checkbox"/> DED

Complete this section as follows:
Insert each toll free number where indicated
Current Resporg ID should be ATT
Insert the Ring to Number for each toll free number
Check the appropriate boxes for Area of Service
Check Port
Check Switched or Dedicated

Initial one of the following

_____. The undersigned is not an agent for any third party. The undersigned represents and warrants that it is the exclusive end user subscriber of the toll-free (8XX) number(s) listed herein and agrees to indemnify, defend and hold Qwest harmless for all liability and expenses for any breach of that representation and warranty.

Initial Here

_____. The undersigned is acting as an expressed authorized agent on behalf of a third party who controls the toll-free (8XX) number(s) listed above. Please list the third party for which you are acting on behalf of: _____.
(Proof of Letter of Agency for telecommunications, including but not limited to RespOrg, is required).

NOTICE REGARDING USAGE-RELATED INFORMATION

In the course of providing service to you, we will possess certain usage-related information about the quantity, type and destination of telecommunications services you use. You have a right, and we have a duty, to protect the confidentiality of this information. This information may be useful to tailor our products and services to your needs and to enhance our ability to meet all of your telecommunications needs. With your approval, we will use your usage-related information to offer you other Qwest (or its affiliates) products or services that may satisfy your needs and to respond to your concerns if you have become dissatisfied or cancel any of our services. Of course, your decision will not harm the quality of service Qwest (or its affiliates) provides, and we will honor your choice until you expressly tell us otherwise.

Yes, I, the undersigned customer hereby authorize Qwest and agents acting on its behalf to: (i) use billing and usage information related to my account to evaluate whether I would benefit from other telecommunications services offered by Qwest; and (ii) market such other telecommunications services to me.

By signing this form, the undersigned also acknowledges that if this is a new toll-free (8XX) number, this toll-free (8XX) number will not be assigned to undersigned until the toll-free (8XX) number is actually ringing to the ring-to number listed above. In addition, the undersigned authorizes Qwest and agents acting on its behalf to verify and amend the Current RespOrg ID to match that found for the toll free (8XX) number(s) as assigned in the national toll free database for the purposes gaining control of the requested toll free number(s). The undersigned further represents warrants and agrees to indemnify, defend and hold Qwest harmless from any damages that may arise from this new toll-free (8XX) number not being available to the undersigned.

Sign Here, leave the date blank for now.

Understood and Agreed:

_____	_____
Signature (required)	Date

Company Name (as listed on current billing invoice):			
Contact:			
Title:			
Service Address:			
City:	State:	Fax Number:	Zip Code:
Phone Number:	Fax Number:		
Comments:			

This section needs to match the current ATT invoice exactly, regardless of how we are setting up the new accounts with Qwest/CenturyLink. There should be a separate Resporg Form completed for each ATT invoice received by the agency.

FOR INTERNAL USE ONLY

Received Date:	Sales Username:
Processed Date:	City: