Transfer of Billing Responsibilities E-mail/Faxback Form Corporate to Personal/Employee Assumption of Liability rev02062007



This form will allow you to transfer billing responsibilities for a Verizon Wireless mobile telephone number currently held by your employer to you.

- 1) Complete all the applicable fields below.
- 2) If you are eligible, or required, to change your calling plan (or if the line you are transferring is the primary line on a Family SharePlan, or is the *only* secondary line on a Family SharePlan), please review the available calling plans on the Verizon Wireless website at verizonwireless.com. After selecting a calling plan, complete the fields in the Calling Plan Change section below.
- 3) Read the terms and conditions of this Transfer of Billing Responsibilities Form.
- 4) Read and accept the Terms and Conditions of the Verizon Wireless Customer Agreement. You may obtain a copy of the Customer Agreement from your Organization or Verizon Wireless representative or online at verizonwireless.com (enter in Customer Agreement in the search field).
- 5) When returning this form via e-mail you must click the box above the signature line below to acknowledge your electronic acceptance of these terms. Save a copy of the form and upload it to the Verizon Wireless Secure Document Gateway at https://b2b.verizonwireless.com/tbmb/formuploader (address must be manually typed in to your browser). The form should then be e-mailed to RanchoBSC@nw.verizonwireless.com. E-mails will only be accepted from your Organization's email domain. Once the form is received, a confirmation e-mail notice will be sent to the requester's e-mail box.
- 6) If e-mail process is not available, return this form via Fax, have both parties sign and print at the bottom of this form and fax this form to:(866) 857-3667

 Note: Completion timelines for the Assumption of Liability request is 3-5 business days.

	Acco	diff informatio	ii (Assuming Gu	stomer)			
Wireless Number to be Transferred:			Create New Billing Account: Yes No				
Assuming Customer Name:			Add to Existing Account Number (if applicable):				
Billing Address: (No PO Boxes)			Date of Birth: Socia		Social Secu	cial Security #:	
Billing Address (Cont):			E-Mail Address:				
City:		Zip Code:	Driver's License	Number:		State:	
Primary Address for Use (if different than billing) Note: No P.O. Boxes:			Home Phone:				
City: State: Zip Code: Work Phone: Calling Plan Change - If Required (Assuming Customer)							
Calling Plan Name:	3	Home Airtime M	-	Monthly Access Fee:		Contract Term: ☐ 12 Months ☐ 24 Months	
Organization Release of Liability (Relinquishing Customer)							
 The account identified must be current (no past due balance) before Verizon Wireless can transfer it to another party. The individual signing this Transfer of Liability on behalf of Organization represents that they have the legal capacity to bind Organization. Organization remains responsible for all charges incurred until the line is transferred. By signing this form, or checking the box below, Organization agrees to release liability for the mobile telephone number indicated above. If returning via email, the Organization representative must include their name and date. 							
If you received this form electronically and are returning via e-mail, please check the box to the left to acknowledge your electronic acceptance of these terms.							
Signed:		Tit	le:				
Name:		Da		Current Corpo		nt Number:	
 Personal/Employee Assumption of Liability (Assuming Customer) Upon processing of the transfer of billing responsibilities, a new personal account will be established for you, for this mobile 							
telephone number for whi Establishment of your new used in conjunction with to your new personal account Termination Fee pursuant Agreement. If you are receiving discount on your organization's ago accordance with your organization to the your rates resulting from a you understand that certal monthly charge may be received.	ch you agree to assive personal account is that credit check. And requires a minimit to the terms and counted monthly accessive mement with Verizanization's agreement minate your service a discount adjustment in information relatations the right to require the right to require	ume all financia is dependent up deposit may be um of an annual anditions of both ass fees as a ben on Wireless, an ent. You agree e without being int to which you ing to your servinization.	al responsibility, bon a credit check on a credit check of required to est. It service agreems that Transfer of that from time that, if you are of a liable for such ar organization by the complex of th	ek. Some of your per ablish this account. ment and you may be f Billing Responsibeloyment: You und to time, your discounterwise subject to Early Termination mas agreed.	ersonal inf e subject of ilities and erstand the punt rate not an Early Fee solely	formation above will be up to a \$175 Early the Customer at this discount is based may be adjusted in Termination Fee, you because of a change in thone number and total	
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