**Activation/Termination Order**

**Configuration Service Performance of Number Portability**

# in case of first portability

# *APPLICANT ( BY OPERATOR RECIPIENT )*

***(Only fields in Yellow have to be filled in by the customer)***

| **Requesting order code** |  |  | **Order date** |  |  | **Order type \*** |  |
| --- | --- | --- | --- | --- | --- | --- | --- |

\* Order type: Activation (0), Termination (1), Progress Status (3)

| **Directory number** |  |  | **Routing number**  | **180319** |
| --- | --- | --- | --- | --- |

| Surname name / company name**VAT number, address, city** |  |
| --- | --- |

| **Cut-over date proposed by the applicant** |  |  | **Proposed time** |  |
| --- | --- | --- | --- | --- |

| **Contract signing date** |  |
| --- | --- |

| **Note:**  |
| --- |

# *SUPPLIER (CARE OF DONATING OPERATOR)*

| **Verification outcome:** | **Date** |  |  | **State \*** |  |  | **Reason for refusal \*\*** |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| **Validation result:** | **Date** |  |  | **State \*** |  |  | **Reason for refusal \*\*** |  |
|  |  |  |  |  |  |  |  |  |
| **Completion outcome:** | **Date** |  |  | **State \*** |  |  | **Reason for refusal \*\*** |  |

\* Status : Rejected (1), Accepted (2), Fulfilled (3), Fulfilled Negatively (4)

\*\* Reason for refusal: Formal (1), Contractual (2), Commercial (3), Technical (4)

| **Supplier cut-over date** |  |  | **Expected time** |  |  |
| --- | --- | --- | --- | --- | --- |

| **Note:** |
| --- |