

**Airtel**

**www.ng.airtel.com**

**Mobile Number Portability Form - Personal**

**PLEASE COMPLETE IN BLOCK LETTERS**

Surname ………………………………………………………………………………… Other Names…………………….……………………………………….………..............

Address………………………………………………………………….…………………….……Street………………….……………………………………………….…………………

LGA………………………………………………….State…………………..…………………… Email (where applicable) ……………..……………………………………….

Gender………………………………………..… Date of Birth……………..……………………….………State of Origin……………………..………………………….…...

Mother’s maiden name …………………………………Customer Alternate number………………………………………………………………….…………………..

Type of Photo ID…………………………………………………………………….…..ID Number ……………………..………………………………………………………..…..

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Mobile**  **Number**  **to be Ported** | **Current**  **Operator (Donor)** | **Airtel SIM**  **Serial Number** | **Current Account**  **Type** | | **New**  **Account**  **Type** | | **Time Validation SMS Sent** |
|  |  |  |  | Pre-Paid | Post-Paid | Pre-Paid | Post-Paid |  |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |

**\* Donor: Subscriber Current Operator**

**Customer Declaration:** I declare that the Information given is correct, that I am appointing AIRTEL to PORT my number, and that

|  |  |  |
| --- | --- | --- |
| 1 | I am the current subscriber of the number(s) to be ported | Yes No |
| 2 | I understand that all messages in the existing voice mailbox(es) and any undelivered SMS  and MMS messages may be lost | Yes No |
| 3 | I understand that the new services available from AIRTEL will depend on the services available in the package options I subscribe to with AIRTEL | Yes No |
| 4 | Any configuration Information from my existing account(s) will not be transferred to  the new account | Yes No |
| 5 | I confirm that my existing SIM/number(s) has been registered with the donor operator | Yes No |
| 6 | I understand that I will be responsible for recovering all outstanding mobile money account  balances with the donor operator | Yes No |
| 7 | I understand that any pre-paid credit with the donor operator will be lost | Yes No |
| 8 | I understand that I will have to pay any early termination charges due to the donor | Yes No |
| 9 | I understand that I will have to pay the donor any subscription and call charges until  the account is closed | Yes No |

Customer Signature……………………………………………….or thumb print

Date:………………………………………………………………………..

**For AIRTEL official use only**

I confirm that I have checked the customer ID and retained a copy or captured the customer’s facial image: Yes No

Channel: Showroom Express shop Field Agent Channel Partner Others

Showroom or Express Shop Name……………………………….…………………………………………

Date – Validation SMS Sent…………………………………………….……………………………………..

Airtel Agent’s name………………………………………………………….……………………….. Signature……………………………………………………….