Transfer of Billing Responsibilities E-mail/Faxback Form

Personal/Employee to Government Agency Assumption of Liability rev. 08112011

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

1) Complete all the applicable fields below.
2) For calling plan changes, please review the available calling plans on the Verizon Wireless website at verizonwireless.com, and complete the fields in the Calling Plan Change section below.
3) Read the terms and conditions of this Transfer of Billing Responsibilities Form.
4) E-mail this form, by clicking the box to the left of the appropriate signature line, save a copy and email it to VZWFederal.Accounts@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.
5) 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: 800-290-1468.

Note: Completion timelines for the Assumption of Liability request is 48 business hours.

Account Information (Relinquishing Customer)

Wireless Number to be Transferred:	Existing Account Number:		
Relinquishing Customer's Name:	Relinquishing Customer's e-mail Address:		
Relinquishing Customer's Billing Address: (No PO Boxes)	City:	State:	Zip Code:
Billing Address (Cont):	Relinquishing Customer's Phone Number:		

Personal/Employee Release of Liability (Relinquishing Customer)

- The account identified must be current (no past due balances) before Verizon Wireless can transfer it to another party.
- Upon completion of the transfer of liability, Verizon Wireless will send you a final bill for all charges due through the date of the transfer of liability. You will be responsible for the payment of this final bill subject to the terms and conditions of your Customer Agreement and it will serve as your only notice of the transfer of liability.
- In addition to assigning all billing responsibilities to your Organization, all calling information associated with this mobile telephone number will become the property of Organization.
- By signing this form, or checking the box below, you agree to release liability for the mobile telephone number indicated above.

☐ If returning via e-mail, please check the box to the left to acknowledge your electronic acceptance of these terms.

Signed:	Date:

Organization Assumption of Liability (Assuming Customer)

- The individual signing this Transfer of Liability on behalf of Organization represents that they have the legal capacity to bind Organization.
- By signing this form, or checking the box below, Organization agrees to assume liability for the mobile telephone number indicated above. (If returning via email, the Organization representative must include their name and date.)
- Upon processing of the transfer of billing responsibilities, Organization will be solely responsible for all financial responsibility for this mobile telephone number.
- This Transfer of Billing Responsibilities is subject to Organization's Agreement with Verizon Wireless.

☐ If returning via e-mail, please check the box to the left to acknowledge your electronic acceptance of these terms.

Signed (Authorized SPOC):	Date:	
Organization Name:	Title:	
Billing Address: (No PO Boxes)	Billing Address (Cont):	
City:	State:	Zip Code:
E-mail Address:	Phone Number:	
Assuming Organization Tax ID #:	Number of Years in Business:	
Create New Billing Account Number:	Add to existing Billing Account:	Existing Account Number: (If applicable):

Calling Plan Change - If Required (Assuming Customer)

Calling Plan Name:	Monthly Access Fee:	Allowance Minutes:
Feature Name:	Feature Monthly Access Fee:	