



Letter of Release Form -Business

Account Number _____

I, *(Current Account Holder)* _____

of *(Current Business Name)* _____

hereby authorise the transfer on ____/____/____ the following list of telephone services

registered by us to that of

(New Account Holder) _____

of *(New Business Name)* _____ ABN: _____

Please state the address the listed telephone services are

I acknowledge that until such time that this Authority Form is received by Novel Telecom Pty Ltd, together with the signed Application Form from the new applicant and this transfer is approved by Novel Telecom Pty Ltd, I will remain responsible for any charges incurred on the above account.

Please tick the reason for this change:

New Business or Company taking over Services.

Change of Business Name

Change of ACN or ABN

Authorised Signature _____ DOB _____

Name _____ Mobile _____

(Current Authorised Signatory)

Title _____ Date _____

Authorised Signature _____ DOB _____

Name _____ Mobile _____

(New Authorised Signatory)

Title _____ Date _____

Please note: A new application is required from the new proprietor or company except for cases of change of business name. In cases of change of business name, please attach Change of Business Name certificate.

Novel Telecom Pty Ltd

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