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| **zákaznický autorizační formulář pro službu přenositelnost čísla (CAF)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Název telekomunikačního provozovatele:**Pavel Bobrik - kbNET**  Identifikace telekomunikačního provozovatele:  **2561** | | | | | | | |  | Požadované datum ukončení služby: | | | |  | | | | | | | | | | | | |  |
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| **1. Informace o účastníkovi** | | | | | | | | |  | | | | | | | | | | | | | | | | | |
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| Jméno vlastníka kontraktu: | | | | | |  | Příjmení, jméno/ název firmy: | | | | | | | | | | | | | | | | | | | | |
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| **2. Adresa instalace** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Přesná adresa instalace služby:** | | | | | |  | Příjmení, jméno/ název firmy: | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | Ulice: | | | | | | | | Číslo domu: | | | | | |  | | |  | | | |
| *(pokud se liší od údajů v bodu 1).* | | | |  | |  |  | | | | | | | |  |  | | | | |  |  | |  |  | | |
|  | Obec/část obce: | | | | | | | |  | Kraj | | | | |  |  | |  |  | | |
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| **3. Informace o telefonní stanici** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Typ služby:  Přenositelnost geografického čísla  Přenositelnost negeografického čísla  Číslo požaduji přenést k poskytovateli: **Pavel Bobrik -kbNET** | | | | |  | | Přenášené číslo 1: | | | | | | | | | | | | | | | | | | | | |
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|  | | Přenášené číslo 2: | | | | | | | | | | | | | | | | | | | | |
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| **4. Podpisy**  Potvrzuji, že jsem vlastníkem kontraktu na uvedenou telefonní stanici a že všechny údaje uvedené v tomto formuláři jsou správné.  Nejsem vlastníkem uvedeného kontraktu, ale jsem zplnomocněn jednat jménem tohoto vlastníka | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Za přejímajícího poskytovatele:** | | | | | |  | Podpis: | | | | | | | | | | | | | | | | | | | | |
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| **Účastník (oprávněný zástupce):** | | | | | |  | Podpis: | | | | | | | | | | | | | | | | | | | | |
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