

# ACCOUNT CORRECTION FORM

## ACCOUNT CORRECTION FORM

SENT BY: \_\_\_\_\_

SALES OFFICE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

PRODUCT CHG \_\_\_\_\_ PROMO CHG \_\_\_\_\_ BOTH \_\_\_\_\_  
(A new signed service order form must accompany cash payment when changing commitment level and/or term length.)

SALES ID: \_\_\_\_\_ BILLING CYCLE: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

ACCOUNT NAME: \_\_\_\_\_

CURRENT PROD: \_\_\_\_\_ PROMO: \_\_\_\_\_

REQUESTED PROD: \_\_\_\_\_ PROMO: \_\_\_\_\_  
(The customer's term plan will start again if the promo and products are changed. Please make sure the customer is informed.)

CONVERTED FROM SWITCHED TO DEDICATED: \_\_\_\_\_(Yes)  
(Please attach all branch account numbers associated with this corporate billing structure to be converted.)

CONVERT: NIGHTLY \_\_\_\_\_ BILLING CYCLE \_\_\_\_\_

COMMENTS: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

1. Fax requests for all term plan customers to Contract Administrator: 800-875-5004
2. Requests for residential accounts only to Com: 800-783-4323
3. For Marketing approval fax to Rich Kunz or Kimberly Mann at: 716-546-3432