



Account Ownership Transfer Agreement

| | | |
|-----------------------------|-----------|--------------------|
| Registered Name of Account: | | |
| Street Address: | | |
| City: | Province: | Postal Code: |
| Account Number(s): | | Date: |
| Email: | | Contact Number(s): |

I, _____ (Registered Name of Account), agree to transfer the ownership of my account _____ in CIK TELECOM INC to _____ effective from the _____ day of _____. I hereby acknowledge that all rights and assets associated with the account will be transferred from _____ to _____ including:

- i. the service plan(s): _____
- ii. the device(s) (Series Number): _____
- iii. the phone number (for phone service only): _____

All liabilities associated with the account including the duty to pay for the service are also transferred from _____ to _____.

Formal Account Owner Name (Print): _____

Formal Account Owner Signature: _____

Date: _____

New Account Owner Name: _____

New Account Owner Signature: _____

Date: _____

*CIK Telecom Inc reserves the right of final interpretation for the content and items hereinabove

| | |
|------------------------------|------------------------------|
| | New Owner Information |
| First Name (Print): | |
| Last Name (Print): | |
| Street: | |
| City/Province/Postal Code: | |
| Current Code Area: (416-XXX) | |
| Contact Number(s): | |
| Email Address: | |

Please write down the correct and eligible email address. You will need the email address to log on your Online Account and receive your monthly e-billing.

Customer Information:

Date of Birth: Month.....Date.... Year

Driver's License No.

Current Phone Service Provider

Current Internet Service Provider.....

Credit Card Type ☐ Visa ☐ MasterCard

Credit Card Number:.....

Expiry Date:(MM)/(YY)

Card Holder Name:

Payment: I authorize CIK Telecom Inc to charge monthly service fee per monthly service bill from my CIK Account

Credit Card ☐

Signature.....

CIK Office Use Only:

1. Contract Form:

☐ New Number: ☐ Email ☐ ID Number ☐ Payment Info ☐ Long Distance ☐ Signature _____
☐ Switch Number: ☐ LPN Form ☐ Company Bill _____

2. Deposit:

☐ Deposit \$ _____ Type _____ ☐ Prepaid Fee \$ _____ Type _____ ☐ Credit/Adjustment \$ _____

3. Database:

☐ Profile ☐ Contract ☐ Status ☐ 911 ☐ Fax ☐ Long Distance Plan ☐ Deposit _____

4. Welcome Letter:

☐ Welcome Letter _____

Account Holder Signature **Date**