



50 Broadway, Ste 1100
New York, NY 10004
(212) 480-4076
info@intercom.com
www.intercom.com

Dear Intercom Customer,

Thank you for being an Intercom customer. Our records indicate that you have advised us that you no longer require our service. We hope we can be of service to you in the future.

If you did not purchase the router or other equipment, then you must return the equipment and all accessories that were provided to you at the time of each service installation (if you had more than one service installed). Please be sure the equipment is properly packaged and insured. The US Postal Service sells a 14-inch by 20-inch cushioned mailer for about \$2 that works well for this purpose. In the event the equipment is not returned within 10 calendar days from the disconnect date, you will be charged for the original retail value of the equipment. Please remember to include the power adapter and cables, and send to:

Intercom Online
Attn: CPE returns
50 Broadway, Suite 1100
New York, NY 10004

Please indicate your account / company name (from your invoice).

If you have questions or comments, please email us at cancelorder@intercom.com. Please note that the cancellation request will not be effective until the attached form is filled out in its entirety, signed, and received by us by fax or email. Thank you for your attention to this matter.

Sincerely,

Intercom Online Inc.



50 Broadway, Ste 1100
 New York, NY 10004
 (212) 480-4076
 info@intercom.com
 www.intercom.com

Fax Completed form to: (503) 501-2975
 E-mail: cancelorder@intercom.com

Intercom Cancellation Form

Tax ID / SS#: _____
 Contact Name: _____ Title: _____
 Company Name: _____
 Telephone Number: _____ Fax Number: _____
 Site Address: _____ City: _____ State: _____ Zip: _____
 Billing Contact Name: _____
 Billing Contact Telephone Number: _____ Fax Number: _____
 Disconnect Date: _____ [services will terminated as of this date]
 (this date *cannot* be earlier than the date this fax is sent back to Intercom)

Please check the reason(s) for your cancellation of service:

- Ordering new, replacement service through Intercom
- Moving location
 - Please provide us with your full new address: _____
 - Who is your new provider? _____
 - Reason for not choosing Intercom for your new location: _____
- Opting for a different Internet service (i.e. satellite; cable; voice T-1)
 - What new service are you opting for? _____
 - Who is your new provider? _____
 - What speed are you purchasing? _____
- Technical problems with service
 - Please detail your problems, incl. trouble ticket number(s): _____
- Better price for the same or similar service
 - What is the better price? _____
 - What is the exact service? _____
 - Who is your new Provider? _____
 - Did you give us a chance to provide a competing quote? _____
- Going out of business / Office location closing
- Central Office closing
- Cannot afford service
- Other _____

Please select which service you want to cancel:

- T-1 Hosting DNS Satellite Colocation
- DSL E-mail The No Spam Zone VoIP Other _____
- Please provide any other details so that we can determine if we are able to waive/reduce any cancellation fees that may be applicable.

I understand that my entire contract obligation must be fully satisfied or I will be subject to early termination fees as per our underlying agreement and that any early cancellation fees, termination fees, open balances and NYS sales tax [if applicable] must be paid immediately to close out this account. In addition, I understand that my contract requires a 30 day advance notice for cancellation and that the 30 days notice shall commence upon Intercom's receipt of this fully completed and signed form. If I did not purchase the router or other equipment, I will return it so that Intercom receives the equipment within 10 days of the disconnect date or I will be charged for the original retail value of the equipment. I understand that hand-written modifications of this Form, mark-ups, or deletions shall not be incorporated into this Cancellation Form and this Form shall not be accepted by Intercom until executed by one of its duly authorized officers.

X _____
 Authorized Representative Date

For office use only. Do not write below this line.

v201004.1

Date Received: _____ Cancellation fees applicable: \$ _____ Term remaining: _____

By: Fax E-mail U.S. Mail Messenger CLEC: _____ Circuit #: _____ Order#: _____

Mgr. Approval Signature: **X** _____