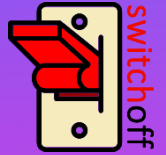


Openreach Switch-off Checklist



The checklist is designed to help provide your company with a smooth transition to the new VoIP (Voice over Internet Protocol) Service. We will then complete a detailed report that informs you what actions your business may need to take to be ready for this switch-off program.

TYPE OF BUSINESS LINE

Check the line type your company uses.

| | |
|--------------------------|----------|
| <input type="checkbox"/> | Analogue |
| <input type="checkbox"/> | ISDN2 |
| <input type="checkbox"/> | ISDN30 |

OTHER LINES & SERVICES

Check the services your company uses.

| | |
|--------------------------|------------------------------|
| <input type="checkbox"/> | Fax Lines |
| <input type="checkbox"/> | Alarm Lines (Digital Dialer) |
| <input type="checkbox"/> | Redcare Alarm Lines |
| <input type="checkbox"/> | PDQ Payment Terminals |
| <input type="checkbox"/> | Payphone Lines |
| <input type="checkbox"/> | Emergency Lift Lines |
| <input type="checkbox"/> | Direct Line Phones |
| <input type="checkbox"/> | EPOS Terminals |
| <input type="checkbox"/> | Personal Health Lines |
| <input type="checkbox"/> | Franking Machines |
| <input type="checkbox"/> | Panic Alarms |
| <input type="checkbox"/> | DDI Numbers |
| <input type="checkbox"/> | Video Conference Lines |

TELEPHONE SYSTEM

Provide details on your telephone system.

| |
|-----------------------|
| System Age (years): |
| Make and Model: |
| Number of Lines: |
| Number of Extensions: |

CONTACT DETAILS

| |
|-------------------|
| Company Name: |
| Full Name: |
| Position: |
| Email address: |
| Telephone Number: |

This information will be protected under GDPR and will not be shared with any third parties.

Please fill out this form and email back to switchoffsupport@digiteurope.co.uk or contact us on **0151 650 6331** for any questions or additional information.