



WDNC Registration Form for Second Tier Customers of Interactive Marketing Solutions

REGISTER FOR THE INTERMODAL PORTED TELEPHONE NUMBER IDENTIFICATION SERVICE

Fields marked with an asterisk (*) are required.

Tracking #

Company Information

Company Name *

Address 1 *

Address 2

City *

State/Province *

Zip Code *

Country

Contact Information

First Name *

Last Name *

Job Title

Phone Number *

Email Address *

Company URL

Intended Use *

Please select at least one of the boxes below that best describes your company's Intended Use of the Intermodal Ported TN data. If you select "Other", please describe.

To avoid from engaging in TCPA Prohibited Conduct by verifying whether TNs are assigned to a paging service, cellular telephone service, specialized mobile radio service, or other radio common carrier service, or any service for which the called party is charged for the call.

Other

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