

Domestic Violence Survivor Self-Attestation Form

By checkin	ig the box, you certify that the fo	llowing is true:
	I am a survivor of domestic viole	ence.
As a result account.	, I want to move my line(s)/phone	number(s) from my current Metro by T-Mobile
without fe	e or penalty, no later than 7 busi release the Primary Account Hol	bile will release you from your current account iness days after receiving this request. Please note der will receive automatic notification of a change to
1.	Phone number to be released: _	
2.	account:	dependents under your care to be released from the _ Dependent Name:
	Phone number: Relationship to Dependent:	_ Dependent Name:
	Phone number: Relationship to Dependent:	_ Dependent Name:

3.	Name and phone number of Primary A	Account Holder:	
(* <u>optional</u>	vide additional supporting material wh for New York residents)		
me pro or (wit	ned affidavit from (1) licensed edical or mental healthcare ovider; (2) victim services provider; (3) employee of court acting thin the scope of employment order	 Police report or Police statements provided to Magistrate/Judges Charging documents Protective or restraining orders Any other official record that documents the domestic violence 	
Attestation certify, to Attestation	n and I have the authority to make this the best of my knowledge, all of the sta	ersonal knowledge of the facts stated in this Attestation on behalf of myself. I further atements and representations made in this at any false statements or misrepresentations	
Signature		Date	
Print Name	e		

Please email this form and any supporting documents needed to: ProtectedCustomerLineSeparation@T-Mobile.com

Please note that while we strive to provide support during this difficult time, our guidance is not a substitute for professional advice. For more information on Domestic Violence support, please visit https://www.metrobyt-mobile.com/resources/keeping-customers-safe-connected or call the National Domestic Violence Hotline at 1-800-799-7233.