

Credit Card Draft Authorization Agreement

This form represents my authorization for Time Warner Cable to automatically draft my **Credit Card** for the total amount presented on my monthly statement.

I understand this Credit Card draft authorization will be in effect until I provide Time Warner Cable a 14-day written notice to terminate the draft. _____
Initial

In the event my Credit Card information changes or expires, I understand I must submit a new Draft Authorization Agreement. _____
Initial

If I transfer my services to a new address within the Time Warner Cable's Charlotte Division, I understand I will need to initiate a new draft per above instructions. _____
Initial

I understand Time Warner Cable will assess me a fee of up to **\$30** for all draft payments returned unpaid by my financial institution. _____
Initial

Please complete the information below and return this application.

Time Warner Cable
Attn: Finance-Support Dept.
3140 W. Arrowood Rd.
Charlotte, NC 28273

**THIS AUTHORIZATION IS NON-NEGOTIABLE AND
NON-TRANSFERABLE**

Print Name (as it appears on your Time Warner bill)

Time Warner account number (20 digits)

Home Phone Number

Time Warner Security Account Number

Authorizing Signature

Today's Date

Name as it appears on your Credit Card

Credit Card Number

Expiration Date

Your draft will begin with the next billing cycle immediately following processing by Time Warner.