

Date: \_\_\_\_\_

Time Warner Cable:

The undersigned hereby give permission to Time Warner Cable (and/or its contractors) to enter the unit listed below for the purpose of installing an additional cable outlet(s). I understand that this might require drilling through interior and possibly exterior walls, and have written below any special handling that is required by the \_\_\_\_\_ (HOA). To receive an additional outlet(s) installation, I acknowledge I currently have a Time Warner Cable account in my name at the same residence where the additional outlet is requested and the account is in good payment status. I also understand that Time Warner Cable will apply a \$99.95 charge for each outlet installed on my regular monthly bill. Any questions may be directed to Customer Service at 512-485-5555.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Unit #: \_\_\_\_\_

Time Warner Cable Account #: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_

Preferred Installation Date: \_\_\_\_\_

Number of Outlets: \_\_\_\_\_

Type: Cable/Phone \_\_\_\_\_

\_\_\_\_\_  
(requestor signature)

\_\_\_\_\_  
(housing owner/manager signature)

\_\_\_\_\_  
(requestor name)

\_\_\_\_\_  
(housing owner/manager name)

\_\_\_\_\_  
(name of homeowners' association)

\_\_\_\_\_  
(signature of homeowners' association officer)

NOTES:

**COPY FORM ONTO HOMEOWNER LETTERHEAD, COMPLETE AND FAX TO TIME WARNER CABLE, ATTN: Q.C. 512.485.6105. RESIDENT WILL BE CONTACTED BY SUBCONTRACTOR AT THE DAYTIME PHONE NUMBER PROVIDED TO SCHEDULE INSTALLATION OF THE OUTLET.**

INSTALLATION START TIME \_\_\_\_\_ INSTALLATION END TIME \_\_\_\_\_

CABLE OUTLETS INSTALLED \_\_\_\_\_ PHONE OUTLETS INSTALLED \_\_\_\_\_ TOTAL OUTLETS INSTALLED \_\_\_\_\_