



# PayBill Advantage Form

For San Diego, Coronado & Desert Cities residents only

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

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

City: \_\_\_\_\_ State: CA Zip: 9

Home Phone: \_\_\_\_\_

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

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

**IMPORTANT: Please Attach a voided check for enrollment, and mail to:**

Time Warner Cable - Desert Cities  
ATTN: Customer Service Support  
41-725 Cook Street  
Palm Desert, CA 92211

**Note:** Please pay this month's cable bill as usual. Your next bill will be paid automatically with PayBill Advantage.

**Customer Authorization:** I authorize my cable company or its agent or the financial institution named above to initiate debit entries to my bank account. I will verify the accuracy of this application and subsequent invoices and promptly notify them of any errors. I agree that my first use of the service will signify my acceptance of the terms of the Service Agreement.

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