



有線電視/「有線寬頻」上網/「有線寬頻」電話

信用卡付款授權書

**CABLE TV / i-CABLE Broadband / i-CABLE HomeLine
Credit Card Payment Authorization Form**



有線電視
CABLE TV

請用英文正楷填寫此表格，並以下列方式交回此申請表格。如有查詢，請致電客戶服務熱線 183 2832。香港有線電視有限公司對於因錯誤郵寄或遺失此授權書而引起的任何損失或損害，概不負任何責任。

Please complete in English BLOCK letter and return this authorization form by the below channels. For enquiries, please call our Customer Service Hotline 183 2832. Please note that Hong Kong Cable Television Limited shall not be liable for any loss or damage suffered as a result of this authorization form being incorrectly posted or lost.

1. 傳真 Fax : (852) 2112 7892

2. 郵寄 Mail : 荃灣郵政總局信箱 357 號 香港有線電視有限公司「賬務管理部」收
Credit and Payment Services Department, HK Cable TV Ltd., Tsuen Wan PO Box 357, N.T.

用戶資料 Subscriber Information

賬戶號碼 Account No.:	登記電話號碼 Registered Phone No.:
用戶姓名 Subscriber's Name:	常用電話號碼 Contact Phone No.:

更新信用卡資料 Credit Card Information Update

(於下列方格內填上☐號 Tick the appropriate box)

- 本人授權香港有線電視有限公司/有線寬頻電訊有限公司由下列信用卡收取上述用戶應繳付「有線電視」及「有線寬頻」之所有費用，直至另行通知為止。辦理有關手續需時三至四星期。
I hereby authorize Hong Kong Cable Television Limited / i-CABLE Telecom Limited to charge all fees due from the above subscriber's CABLE TV and i-CABLE account(s) to my credit card specified below until further notice. It will take approximately 3 to 4 weeks for processing.
- 本人授權香港有線電視有限公司/有線寬頻電訊有限公司於下列信用卡賬戶中扣取 HK\$_____ [只限一次付款]
I hereby authorize Hong Kong Cable Television Limited / i-CABLE Telecom Limited to charge the following credit card for HK\$_____ [one-off payment only]
- 請停止於下列信用卡賬戶扣取「有線電視」及「有線寬頻」之服務費用並更改為現金付款。(須預先繳付服務費* HK\$600)
Please stop charging the following credit card account for the CABLE TV and i-CABLE service fees and change to CASH payment. (A pre-payment* of HK\$600 will be charged)
* 已預繳的服務費用將於第二至十三個月，以每月扣減 HK\$50 服務費回贈。The prepayment will be rebated starting from the 2nd month to the 13th month by HK\$50 monthly installment.

以上三個選項必須並只可選擇其一 It must and only choose 1 of above 3 items

請注意：如使用第三者信用卡，需附上信用卡正面之副本以供核對

(帶*號的項目是必須填寫 It must complete the items with *)

If provide 3rd party's Credit Card, please attach a photocopy of the front of credit card for verification

*持卡人姓名
*Cardholder's Name: _____

*信用卡持有人聯絡電話
*Cardholder's Contact Phone No.: _____

*持卡人簽署
*Cardholder's Signature: _____

(簽署必須與下列信用卡簽署式樣相同。Signature should correspond to specimen signature on the below specified credit card)

*信用卡號碼
*Card No.: _____ - _____ - _____ - _____

*有效期至
*Expiry Date: ____/____/____

*信用卡類別
*Card Type: VISA / MASTER