

For Commission Use Only:
Case: 10-0645

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION FORMAL COMPLAINT

2010 NOV 12 A 11: 06

Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701

ORIGINAL

CHIEF CLERK'S OFFICE

Regarding a complaint by (Person making the complaint): Deborah Thomas-Ying

Against (Utility name): Northern Illinois Gas Company

As to (Reason for complaint) Additional down payment/lump sum after large down payment/lump sum had been paid as requested. Refusal of NI Gas to offer 24 month \$7500 DPA.

in Rockford Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 2228 Maxine Lane, RKFD, ILLINOIS 61102

The service address that I am complaining about is 2228 Maxine Lane, RKFD, ILLINOIS 61102

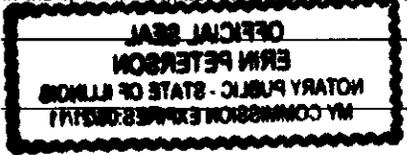
My home telephone is [815] 965-5125

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [815] 965-5125

My e-mail address is N/A I will accept documents by electronic means (e-mail) Yes No

(Full name of utility company) Northern Illinois Gas Co. (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.



Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint? Yes No

Has your complaint filed with that office been closed? Yes No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

1. I am filing this complaint for Deborah Yung as a dispute of
 2. the DPA and extra down payment.
 3. The company refused to give Deborah a \$75.00/24 month DPA.
 4. They charged a substantial down payment and LIHEAP paid \$461.00
 5. After NI Cos received the \$461.00 LIHEAP pay, they still wanted another \$460.00 payment.
 6. The company refused to adjust the balance and accept the LIHEAP payment as the down payment.
- The original balance was incorrect from 8/16/2010 complaint

Please clearly state what you want the Commission to do in this case:

DPA at \$75.00 per month, We wish to get back to a 24 month for accuracy. NI Cos has already received \$461.00 from LIHEAP, therefore no more down pay should be needed. And Review the out standing balance

NOTICE: If personal information (such as a social security number or a bank account number) is contained in this complaint form or provided later in this proceeding, you should submit both a public copy and a confidential copy of the document. Any personal information contained in the public copy should be obscured or removed from the document prior to its submission to the Chief Clerk's office. Any personal information contained in the confidential copy should remain legible. If personal information is provided in your public copy, be advised that it will be available on the internet through the Commission's e-Docket website. The confidential copy of any filing you make, however, will only be available to Commission employees. If you file both a public and confidential version of a document, clearly mark them as such.

Today's Date: 11/09/2010
(Month, day, year)

Complainant's Signature: [Signature]

If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail address:

When you finish filling out this complaint form, you need to file the original with the Commission's Chief Clerk. When filing the original complaint, be sure to include one copy of the original complaint for each utility company complained about (referred to as respondents).

VERIFICATION

A notary public must witness the completion of this part of the form.

I, Deborah Yung, Complainant, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

[Signature]
Complainant's Signature



Subscribed and sworn/affirmed to before me on (month, day, year) 11-9-2010

[Signature]
Signature, Notary Public, Illinois

(NOTARY SEAL)

NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing.