ORIGINAL

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

For Commission Use Only:
Case: 14-0032

FORMAL COMPLAINT

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

Regarding a complaint by (Person making the complaint): Barbara Taylor

Against (Utility name): Aqua Illinois. Inc

As to (Reason for complaint) Charges were applied to my account that I did not owe. And descrepancies and charges on my current bill.

RECEIVED
JAN 10 2014
ILLINOIS COMMERCE COMMISSION
CHIEF CLERK'S OFFICE

in _____ Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 260 E. John Casey rd. Bourbonnais IL.

The service address that I am complaining about is 260 E. John Casey rd. Bourbonnais IL. 60914

My home telephone is [815] 370-7388

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [815] 370-7388

My e-mail address is _____ I will accept documents by electronic means (e-mail) ☐ Yes ☑ No

(Full name of utility company) Aqua Illinois Inc. (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.
200630, 200.350, 200350

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.

charges were applied to my account that I did not owe. between the year of 2008 – 2012.

Please clearly state what you want the Commission to do in this case: Remove the charges that are not mine immediately.

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 (Social Security Number, Driver's License Number, Medical Records, etc.) 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: 12-20-13 (Month, day, year)

Complainant's Signature: Barbara Taylor

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, Barbara Taylor, 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.

Barbara Taylor
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) Jan. 9, 2014.

Brenda Kocsis
Signature, Notary Public, Illinois

NOTARY PUBLIC OFFICIAL SEAL STATE OF ILLINOIS
BRENDA KOCSIS
MY COMMISSION EXPIRES NOVEMBER 17, 2014

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