

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
FORMAL COMPLAINT
Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701

Case: _____

15-0543

ORIGINAL

Regarding a complaint by (Person making the complaint): Sandra Washington

Against (Utility name): Prarie Point Energy, L.L.C

As to (Reason for complaint): Over Charge + Refund Request.

Prarie Point Energy was over billing, multiple billing within a billing cycle, charging late fees when customer is not late with bill. As of today Prarie Point Energy is still billing me, and also people Gas.

in Chicago Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 4934 W. Nirsch St, Chicago, IL 60651

The service address that I am complaining about is 4934 W. Nirsch St, Chicago, IL 60651

My home telephone is (773) 921-3066

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at (773) 921-3066

My e-mail address is 548-99@yahoo.com I will accept documents by electronic means (e-mail) Yes No

(Full name of utility company) Prarie Point Energy, L.L.C (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.
Sec 9-252 of Public Utility Act rate 18 - Disconnect or termination of service 6-1 - Billing rule, 6.2 Estimate billing, 8 - unbilled service and treatment of alleged taps, 16 - Disputed procedure

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.

~~Prarie Point E.W.~~
~~Nico Advanced Energy~~ charged me excessive bills, billed multiple times within a billing cycle, charge me fees while an investigation was in process. and billed me for services that was not authorized.

Please clearly state what you want the Commission to do in this case: - I would like to be refunded of over charged bills paid.

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: 9/4/2015
(Month, day, year)

Complainant's Signature: Sandra Washburn

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, Sandra Washburn 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.

Sandra Washburn
Complainant's Signature



Subscribed and sworn/affirmed to before me on (month, day, year) 9/4/2015

Karen Smith
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.