

ORIGINAL

S.T. 91612
7/27/81

PENNSYLVANIA PUBLIC UTILITY COMMISSION

For Commission Use Only: COMPLAINT DOCKET NO. <u>28191612</u>	REF. # _____	UTILITY CODE _____
<u>OMEGA GRAY</u>	VS. <u>DUQUESNE LIGHT COMPANY</u>	

PLEASE PRINT:

1. YOUR NAME, ADDRESS AND TELEPHONE NUMBER.

Name Omega Gray
 Street 2248 Wilmer Dr.
 City Pittsburgh State Pa. Zip 15221
 County Alleg. Home Telephone-Area Code 412 244-93-91
 Work Telephone-Area Code () _____

RECEIVED
 SECRETARY'S OFFICE
 PUBLIC UTILITY
 COMMISSION
 JUL 27 8 48 AM '81

2. COMPANY YOU ARE COMPLAINING ABOUT.

Name Duquesne Light Co.

3. WHAT IS YOUR COMPLAINT (DESCRIBE PROBLEM)

I was asked to pay 365.00 by money at once. Gave \$90 + 60 cash, and then \$5.00. They did not subtract this amount from total. Carried their Dr. statement for my diabetes; still they wanted to terminate me. I give them \$35.00 every 2 weeks with agreement and I cannot get over no diabetes in a month or my high blood pressure; I go to Columbia Hospital for treatment and nurse comes to my house once a week.

DOCKETED (More Space On Back)

For Commission Use Only: DATE FILED <u>07 27/81</u>	MONITOR <u>Shanaman</u>	BUREAU <u>ALJ</u>	JUL 28 1981
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Don't care what you
pay; you don't get
any credit for it; they
keep adding on and no.

(If You Need More Space Attach Paper)

4. WHAT DO YOU WANT US TO DO?

Make them adjust my bill
right.

(If You Need More Space Attach Paper)

YOU MUST SIGN HERE

Omega Gray

Signature of complainant or
attorney for corporate complainant

PUT TODAY'S DATE HERE

July 23, 1981

Today's Date

YOU DO NOT NEED A LAWYER

If you DO have a lawyer PLEASE PRINT the lawyer's name, address
and telephone number below.

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Telephone Number-Area Code () _____

THIS MUST BE COMPLETED BY NOTARY PUBLIC
AFFIDAVIT (Natural Person)

COMMONWEALTH OF PENNSYLVANIA }
Allegheny County } ss:

Omega Gray, being duly sworn (affirmed) according to law, deposes
and says that the facts above set forth are true and correct; or are true and correct to the best of his knowledge,
information and belief and he expects to be able to prove the same at the hearing hereof.

Omega Gray
Signature of Affiant

Sworn and subscribed before me this 15th

day of July 19 81

My Commission Expires _____

DENISE R. WALKER, NOTARY PUBLIC
WILKINSBURG BORO. ALLEGHENY COUNTY
MY COMMISSION EXPIRES MAY 25, 1985
Member, Pennsylvania Association of Notaries

Denise R. Walker
Signature of Official Administering Oath

AFFIDAVIT (Corporation)

COMMONWEALTH OF PENNSYLVANIA }
_____ County } ss:

_____, being duly sworn (affirmed) according to law, desposes
and says that he is _____ of _____
(Office of Affiant)

_____, that he is authorized to and does make this affidavit
(Name of Corporation)

for it, and that the facts above set forth are true and correct; or are true and correct to the best of his knowledge,
information and belief and he expects the said _____

_____ to be able to prove the same at the hearing hereof.
(Name of Corporation)

Signature of Affiant

Sworn and subscribed before me this _____

day of _____ 19 _____

My Commission Expires _____

Signature of Official Administering Oath



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P. O. BOX 3265, HARRISBURG, Pa. 17120

7/27/81

July 7, 1981

IN REPLY PLEASE
REFER TO OUR FILE

S.T. 91612

Ms. Omega Gray
2298 Wilner Drive #8780
Pittsburgh, Pennsylvania 15221

Omega Gray, Complaint Appellant **Z8191612**
v.
Duquesne Light Company

Dear Ms. Gray:

Enclosed are an instruction sheet and five forms to be completed, signed and returned to us. Mail to:

Deputy Secretary
Pennsylvania Public Utility Commission
P.O. Box 3265
Harrisburg, Pa. 17120

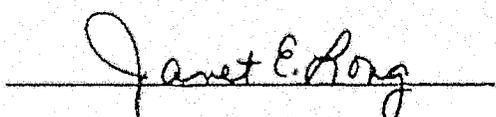
THESE FORMS MUST BE RETURNED BY July 27, 1981

The company cannot terminate your service while you are filling out these forms or while you are waiting for your hearing if you keep paying your monthly bills which the company mails to you. If you do not return the forms on time or if you do not pay your monthly bills from the company, your service can be shut off with only three days notice.

The company will receive a copy of this letter so that they will know that you have asked for a hearing. Remember, it is very important for you to:

1. Complete, sign and date the four formal complaint forms.
2. Have affidavit completed by notary public.
3. Return all completed forms by the date in the box above.
4. Pay all monthly bills that you receive from the company.

Sincerely,



cc: John M. Arthur, Chairman of the Board & Chief Executive Officer, Duquesne Light Company, 435 Sixth Avenue, Pittsburgh, Pennsylvania 15219

Bureau of Consumer Services

JEL:sjp

If you are not happy with the decision and you are returning the bottom
of this paper, you MUST continue to pay bills for service which you will
receive each month from the company. If you do not pay the monthly
bills, the company may terminate your service before you have your hearing.

REQUEST FOR APPEAL FROM MEDIATION DECISION JUL 2 5 43 AM '81

I want to file a formal complaint and have a hearing with the P.U.C. Please send me the formal complaint forms at the following address:
P.O. Box 5101
COMMERCIAL

(Please print information below)

Name Onesay Gray S.T. Number 91612
Street 2298 Linden Dr. #878 Telephone # 244-93
City, State Palmdale East Hills Zip Code 15221

THIS SLIP MUST BE RETURNED WITHIN TEN DAYS OF THIS DATE JUN 25 1981

YOU DO NOT NEED A LAWYER TO FILE A FORMAL COMPLAINT AND HAVE A HEARING!

PUBLIC UTILITIES
BUREAU OF
CONSUMER SERVICES
MEDIATION
1981

28191612

Discussion Right

July 20, 1981

Omega Gray
v.
Duquesne Light Company

Z8191612

Omega Gray
2298 Wilner Drive
Pittsburgh, Pennsylvania 15221

Dear Madam:

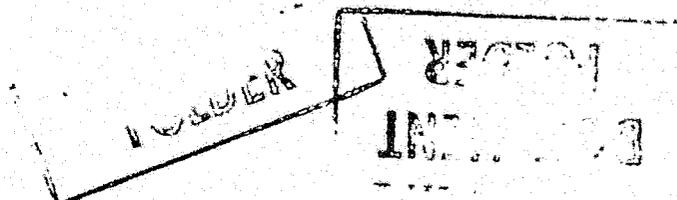
Your complaint against Duquesne Light Company is being returned herewith with the request that you sign all copies thereof and return them to us ON OR BEFORE JULY 27, 1981.

Upon receipt of the signed complaint forms, same will receive our consideration.

Very truly yours,

for WILLIAM P. THIERFELDER
Secretary

Enclosures
cc: Janet Long
Bureau of Consumer Services
HHH:mpk





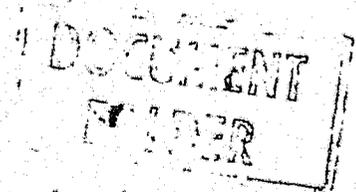
COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P. O. BOX 3265, HARRISBURG, Pa. 17120

July 30, 1981

IN REPLY PLEASE
REFER TO OUR FILE

Z-8191612

John M. Arthur, Chairman of the Board & Chief Executive Officer
Duquesne Light Company
435 Sixth Avenue
Pittsburgh, Pennsylvania 15219



Dear Mr. Arthur:

A complaint has been filed against you before the Pennsylvania
Public Utility Commission by Ms. Omega Gray
(the complaining party)

To defend yourself against the claims stated in the following pages, you
must act within twenty (20) days, by filing in writing with the Commi-
ssion, either personally or through your attorney, your defenses or
objections to the claims stated against you. Or, you may satisfy the
complaint by settling the matter with the Complainant and submitting
proof of settlement to the Commission with twenty (20) days.

IF YOU FAIL TO RESPOND WITHIN TWENTY (20) DAYS THE CASE MAY GO
FORWARD IN YOUR ABSENCE AND A JUDGMENT MAY BE ENTERED AGAINST YOU BY THE
COMMISSION WITHOUT FURTHER NOTICE.

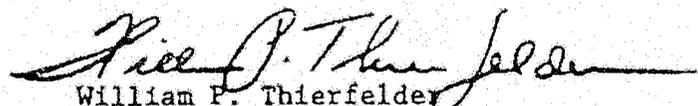
AN ADMINISTRATIVE LAW JUDGE MAY REVOKE OR SUSPEND ANY CERTIFICATE
OR PERMIT HELD BY YOU, OR IMPOSE A FINE, OR ANY OTHER APPROPRIATE
PENALTY OR REMEDY AUTHORIZED BY THE PUBLIC UTILITY CODE. YOU MAY
LOSE MONEY OR PROPERTY OR OTHER RIGHTS IMPORTANT TO YOU.

Detailed instructions on how to proceed are contained in the
attached pages. You are advised to read them carefully.

Unless you are a corporation or other organization, you may
proceed without a lawyer. However, if you want a lawyer and do not have
one or cannot afford one, the office listed below can tell you where you
can get legal help:

Pennsylvania Lawyer Referral Service
Pennsylvania Bar Association
P.O. Box 186
Harrisburg, Pennsylvania 17108
(800) 692-7375

Very truly yours,


William P. Thierfelder
Secretary

Attachment

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

Omega Gray

v.
Duquesne Light Company

Complaint Docket
No. Z-8191612

AUG 8 1981

FORMAL COMPLAINT
NOTICE TO RESPONDENT
TO ANSWER OR SATISFY

TO: John M. Arthur

TAKE NOTICE:

That a complaint in the above entitled matter, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. Section 702 of the Public Utility Code, 66 Pa.C.S. §702, requires the Commission to serve on each party named in a complaint a copy of the complaint and notice calling upon each party to satisfy the complaint, or to answer the same in writing within a specified time; THEREFORE,

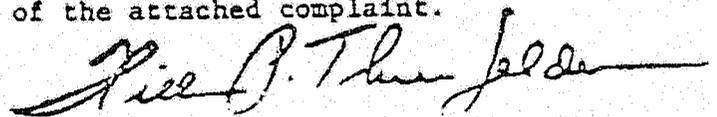
1. You have twenty (20) days from the date on which this complaint is served to either satisfy this complaint or to file with the Secretary of the Pennsylvania Public Utility Commission, P.O. Box 3265, Harrisburg, PA 17120, an answer (original and two copies), in writing, under oath, which, as required by Section 35.35 of the General Rules of Administrative Practice and Procedure, 1 Pa. Code §35.35, either affirms or specifically denies the allegations in this complaint. You must also serve a copy of the answer upon the complainant.
2. If you fail to either satisfy this complaint or to file an answer or other responsive pleading within twenty (20) days, you will be deemed to have admitted all the allegations in this complaint in accordance with Section 35.35 of the General Rules of Administrative Practice and Procedure, 1 Pa. Code §35.35. In that event, an Administrative Law Judge of the Commission may, without hearing, enter an order which either revokes or suspends any certificate or permit held by you or which imposes a fine or any other appropriate penalty or remedy

authorized by the Public Utility Code, 66 Pa.C.S. §101, et seq.; and, if you are a customer of a utility, an order may be entered which prescribes a payment schedule or which authorizes termination of utility services. The Administrative Law Judge is not limited to the relief sought by the complainant in paragraph 4. of the attached complaint.

3. If you elect to satisfy this complaint you must file, within twenty (20) days from the date on which this complaint is served, affidavits executed by each complainant that this complaint has been satisfied. Such affidavits must describe the basis on which this complaint was satisfied; any settlement agreement between the parties must be reduced to writing and attached to the affidavit. Such affidavits are to be filed with the Secretary of the Commission at the address set forth in paragraph 1. Upon receipt of affidavits of satisfaction from all complainants, this complaint will be dismissed by an Administrative Law Judge in accordance with Section 703(a) of the Public Utility Code, 66 Pa.C.S. §703(a), unless the Judge determines that such dismissal would be contrary to the public interest, in which event he may direct that hearings be held upon the complaint.

4. If you file an answer which admits the allegations in this complaint, or which fails to specifically deny the allegations in this complaint, an Administrative Law Judge will, without hearing, enter an order which either revokes or suspends any certificate held by you or which imposes a fine or any other appropriate penalty or remedy authorized by the Public Utility Code, 66 Pa.C.S. §101, et seq.; and, if you are a customer of a utility, an order may be entered which prescribes a payment schedule or which authorizes termination of utility services. The Administrative Law Judge is not limited to the relief sought by the complainant in paragraph 4. of the attached complaint.

5. If you file a timely answer which specifically denies the allegations in this complaint, or which raises material questions of law or fact, this matter shall be referred to the Office of Administrative Law Judge for hearing and decision. If, after hearing on the issues raised by that answer, you are found to have committed any of the violations alleged in this complaint, the Administrative Law Judge may render a decision which either revokes or suspends any certificate or permit held by you or which imposes a fine or any other appropriate penalty or remedy authorized by the Public Utility Code, 66 Pa.C.S. §101, et seq.; and, if you are a customer of a utility, an order may be entered which prescribes a payment schedule or which authorizes termination of utility services. In the imposition of a penalty after hearing the Administrative Law Judge is not bound by the relief sought by the complainant in paragraph 4. of the attached complaint.



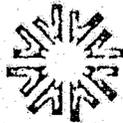
William P. Thierfelder
Secretary

(SEAL)

July 30, 1981

Certified Mail

Return Receipt Requested



Duquesne Light Company

Legal Department
435 Sixth Avenue
Pittsburgh, Pennsylvania
15219
(412) 456-6000

Writer's DIRECT DIAL Number

456-6129

August 11, 1981

Omega Gray
2298 Wilner Drive
Pittsburgh, Pennsylvania 15227

Dear Ms. Gray:

Enclosed please find an original and copy of Interrogatories which you should answer under oath, have notarized, and return to me within twenty days. Failure to do so may jeopardize the Complaint which you have filed before the Pennsylvania Public Utility Commission. I have also enclosed for your convenience a self-addressed, stamped envelope.

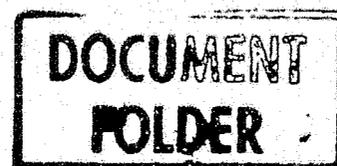
Very truly yours,

A. William Stein
Attorney

AWS:reh
Enclosures

cc: Mr. William P. Thierfelder, Secretary (w/enc.)
Pennsylvania Public Utility Commission

Certified Mail - Return Receipt



DOCKETED
AUG 13 1981

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

OMEGA GRAY)
) Complaint Docket
 v.)
) No. Z-8191612
DUQUESNE LIGHT COMPANY)

INTERROGATORIES PROPOUNDED BY DUQUESNE LIGHT COMPANY
TO BE ANSWERED BY THE COMPLAINANT

Duquesne Light Company ("Duquesne"), by its counsel, hereby requests, pursuant to Section 333 (c), (d) and (e) of the Public Utility Code, [Pa. C.S. §333(c), (d), (e); 66 P.S. §458.4(c), (d), (e)], and all applicable rules of procedure, that the Complainant, Omega Gray, answer the following Interrogatories within twenty (20) days of receipt thereof. These Interrogatories must be answered under oath, and shall be deemed continuing, so as to require supplemental answers under oath if the Complainant, or any one acting on Complainant's behalf, obtains additional information between the time the answers are sworn to and the time of the conclusion of this proceeding.

1. How long have you occupied 2298 Wilner Drive?

**DOCUMENT
FOLDER**

2. Name the occupants of 2298 Wilner Drive and list their ages.

3. Give the relation to you of those listed in Question No. 2.

4. Are you married, divorced, or separated?

5. State the name and present address of your spouse or former spouses.

6. Is your residence a house or an apartment?

7. How many rooms are there in your residence?

8. Are you employed? If so, name your employer, the employer's address and your rate of pay.

9. If you are unemployed, name your last employer, your last date of employment, your last employer's address and your final rate of pay.

10. Do you receive any financial support from your spouse or from your former spouses? If so, list the approximate monthly payments you receive.

11. Do you have any children? If so, list their names, ages and indicate their addresses.

12. Do you provide financial support to any of the children listed in Question No. 11? If so, indicate which children and the amount of support provided.

13. Do your children provide you with any support? If so, indicate which children and the amount of support provided.

14. Are you receiving Unemployment Compensation? If so, state the weekly amount of your checks.

15. Are you receiving Welfare payments? If so, state the amount of your monthly checks.

16. Are you receiving Social Security benefits? If so, list the amount of your monthly checks.

17. Are you receiving alimony or child support payments? If so, list the amount and frequency of your checks.

18. State the total amount of your monthly income from all sources not previously named.

19. State the sources from which you receive the income listed in Question No. 18.

20. If you are married, state your husband's monthly income.

21. State the source, or sources, of your husband's income.

22. If you are sharing your residence with another adult, give his or her name.

23. If you are sharing your residence with another adult, list his or her monthly income and the source of his or her income.

24. State whether you have applied for Federal or state Energy Assistance grants. Indicate the date of application and the amount you have received.

25. Is your heating, gas, oil or electric; and are you paying these bills?

26. What are your monthly heating bills?

27. What is your monthly rent? Are you paying these bills?

28. Are your heating bills paid up? If not, state the amount owed.

29. What was the amount of your telephone bills for June, 1981 and July, 1981?

30. Do you have an electric water heater?

31. Do you have a freezer?

32. Do you have a refrigerator?

33. How many television sets do you operate in your residence?

34. How many air conditioners, if any, do you operate?

35. Do you have a washing machine?

36. Do you have a clothes dryer?

37. List all electrical appliances or fixtures in your residence:

a. Kitchen.

- b. Living room.
- c. Dining room.
- d. Bathroom.
- e. Bedroom No. 1.
- f. Bedroom No. 2.
- g. Bedroom No. 3.
- h. Family room or den.
- i. Other rooms.

38. State whether your financial condition changed in 1981. Explain how it changed, if it did.

39. With respect to each person whom you intend to call as a witness at the PUC hearing, state:

- a. Name
- b. Address
- c. Employer and job title.
- d. Nature of the testimony.

40. List your typical monthly expenses.

41. When was your last payment to Duquesne Light Company? State the amount of that payment.

42. Are you paying current Duquesne Light Company bills?

43. Did you contact the Mediation Unit of the PUC on June 23, 1981 regarding your electric bill?

44. Did you agree with the Mediation Unit to pay all current Duquesne Light Company bills and to pay \$35.00 every two weeks?

45. List all your delinquent bills, the names of the creditors, and the amount of the bills.

46. What amount are you willing to pay on your electric bill?

47. What amount per month are you willing to pay on past due electric bills?

48. Describe in detail the nature of your complaint against Duquesne Light Company and the relief requested.

I hereby certify that the above answers to Respondent's Interrogatories are complete, true and correct.

Omega Gray

Sworn to and subscribed
before me this _____
day of _____
1981.

Notary Public

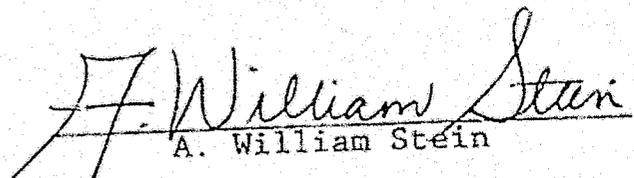
CERTIFICATE OF SERVICE

I hereby certify that the foregoing Interrogatories propounded by Duquesne Light Company and to be answered by the Complainant were served today upon the following persons:

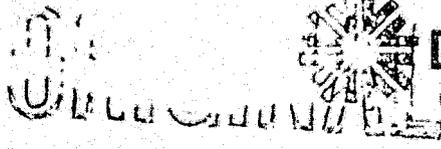
William P. Thierfelder, Secretary
Pennsylvania Public Utility Commission
P. O. Box 3265
Harrisburg, Pennsylvania 17120

Omega Gray
2298 Wilner Drive
Pittsburgh, Pennsylvania 15227

Dated at Pittsburgh, Pennsylvania this 11th day
of August, 1981.


A. William Stein

Counsel for
Duquesne Light Company



Duquesne Light Company

Legal Department
435 Sixth Avenue
Pittsburgh, Pennsylvania
15219
(412) 456-6000

Writer's DIRECT DIAL Number:

456-6129

August 11, 1981

William P. Thierfelder, Secretary
Pennsylvania Public Utility Commission
P. O. Box 3265
Harrisburg, Pennsylvania 17120

AUG 13 9 38 AM '81
RECEIVED
SECRETARY'S OFFICE
PUBLIC UTILITY
COMMISSION

Re: Omega Gray v. Duquesne Light Company
Complaint Docket No. Z-8191612

Dear Mr. Thierfelder:

Enclosed please find an original and two copies of the Answer of Duquesne Light Company, Respondent in the above-captioned case.

Very truly yours,

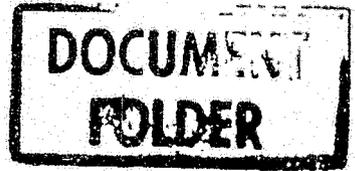
A. William Stein
A. William Stein
Attorney

AWS:reh
Enclosures

cc: Omega Gray

(w/enc.)

Certified Mail - Return Receipt



ANSWER TO COMPLAINT

1. Admitted.

2. Admitted.

3. Denied as stated. Respondent specifically denies that it added any of the Complainant's payments to her total bill and in support thereof attaches hereto and incorporates by reference as Exhibit A a true and correct copy of an itemized listing of the Complainant's monthly bills and payments. By way of further reply, the Complainant agreed before the Mediation Unit of the Commission to pay \$35.00 every two weeks to the Respondent until the balance of the Complainant's bill is paid.

4. Paragraph 4 of the Complainant's Formal Complaint constitutes a prayer for relief and as such requires no answer by the Respondent. To the extent that a response may be required, the Respondent avers that the Complainant was provided adequate and reasonable service and that the Complainant is required to pay for the service in accordance with the tariff rate.

WHEREFORE, Respondent, Duquesne Light Company, denies any and all liability to the Complainant and demands that the Complainant's Complaint be dismissed.

I

MOTION TO DISMISS BY REASON OF COMPLAINANT'S FAILURE
TO COMPLY WITH THE COMMISSION'S REGULATIONS

1. The Commission's regulations at 52 Pa. Code §56.141 provide that "any notice of dispute, including termination disputes, shall proceed in the first instance, according to the provisions set forth in this section." Complainant contacted the Mediation Unit of the Commission on June 23, 1981, concerning this matter. On June 25, 1981, the Complainant offered to pay Respondent's bill at the rate of \$35.00 every two weeks until the balance was paid. The Complainant was advised of the Commission's acceptance of her offer by letter dated June 25, 1981, a copy of which is attached to the Respondent's Answer and Motions To Dismiss as Exhibit B. The above letter reads in part:

"If the customer or the Company is not happy with this decision, a hearing with the PUC can be requested. To request a hearing you must clip off the bottom of this paper, fill in the blanks, and mail it back to the PUC at the address shown at the top of this paper within ten days of this date, June 25, 1981."

Complainant's Formal Complaint was filed on July 23, 1981, and the Respondent believes and thus avers that the Complainant has not requested an extension of time in which to file her Complaint.

2. The Commission's regulations at 52 Pa. Code §56.172 provide that an appeal from the report of the

Consumer Service Representative may be filed by means of a formal complaint within ten days of notification or mailing of the informal complaint report, "... and not thereafter except for good cause..".

3. Complainant has failed to comply with the Commission's regulations for the resolution of disputes by filing this Complaint beyond the time required for the filing of said Complaint.

WHEREFORE, Respondent, Duquesne Light Company, moves that the Complaint in this proceeding be dismissed by reason of the Complainant's failure to diligently prosecute the Complaint.

II

MOTION TO DISMISS BY REASON OF COMPLAINANT'S FAILURE TO FILE A PROPER COMPLAINT

1. Section 701 of the Public Utility Code (66 Pa. C.S.A. §701) provides, in relevant part, as follows:

"The Commission, or any person, corporation, or municipal corporation having an interest in the subject matter, or any public utility concerned, may complain in writing, setting forth any act or thing done or omitted to be done by any public utility in violation, or claimed violation, of any law which the Commission has jurisdiction to administer, or of any regulation or order of the Commission." [emphasis supplied]

Sections 3.121(a) and (a)(4) of the Special Rules of Practice and Procedure of the Commission [52 Pa. Code §3.121(a) and (a)(4)] read as follows:

"(a) Each formal complaint shall set forth all of the following:

* * *

(4) The act or thing done or omitted to be done or about to be done or omitted to be done by the respondent in violation, or claimed violation, of any law which the Commission has jurisdiction to administer or of any regulation or order of the Commission, with specific reference to the section of the statute or particular regulation or order of the Commission involved." [emphasis supplied]

2. As is evident from an inspection of the Complaint filed with the Commission in this matter, Complainant has failed to set forth with specific reference the section of the statute or particular regulation or order of the Commission. Complainant has also failed to allege in what manner the service was of an inadequate quality. Respondent is, therefore, unable to sufficiently respond to the Complaint. The Complaint is legally insufficient.

WHEREFORE, Respondent, Duquesne Light Company, moves that the Complaint be dismissed by reason of the Complainant's failure to file a proper complaint.

III

MOTION TO DISMISS BY REASON OF COMPLAINANT'S REQUEST FOR IMPROPER RELIEF

1. To the extent that the Complainant requests

in her prayer for relief a forgiveness of liability or a limitation upon her monthly payments, Respondent pleads §1303 of the Public Utility Code (66 Pa. C.S.A. §1303). Said Section provides as follows:

"§1303. Adherence to tariffs.

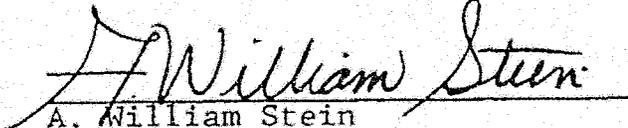
No public utility shall, directly or indirectly, by any device whatsoever, or in any wise, demand or receive from any person, corporation, or municipal corporation a greater or less rate for any service rendered or to be rendered by such public utility than that specified in the tariffs of such public utility applicable thereto. Such tariffs shall be the lawful rates of such public utility until changed, as provided in this part. Any public utility, having more than one rate applicable to service rendered to a patron, shall, after notice of service conditions, compute bills under the rate most advantageous to the patron." [emphasis supplied]

2. Respondent is required by the Public Utility Code to bill Complainant for the full amount of electric service consumed, and Complainant is required by the Public Utility Code to pay the lawful tariff rate for the full amount of electric service consumed. If Complainant is allowed to pay less than the lawful tariff rate for the full amount of service consumed, Complainant will receive an unreasonable preference or advantage by reason of reduced billings, which preference or advantage is prohibited by

the Public Utility Code.

WHEREFORE, Respondent, Duquesne Light Company, moves that the Complaint be dismissed by reason of Complainant's request for improper relief.

Respectfully submitted,


A. William Stein

Attorney for Respondent
Duquesne Light Company
435 Sixth Avenue
Pittsburgh, PA 15219
(412) 456-6129

DATE 7-06 1981

NAME OMEGA GRAY TEL. NO.
USING ADDRESS 2298 WILMER DR
MAILING ADDRESS PGH PA 15221 1164

CUSTOMER ACCOUNTING DEPT. - PLEASE FURNISH THE FOLLOWING INFORMATION:

Form with checkboxes: DUPLICATE BILL FOR AMOUNT OWING, DELINQUENT NOTICE-DATE PAID, CREDIT NOT SHOWN ON BILL, STATEMENT OF ACCT. 24 MONTHS, EXPLAIN OTHER CHARGES OF \$, OTHER DATA-SPECIFY, SECURITY DEPOSIT \$, DATE REFUNDED, VOUCHER NO.

P.U.C. FORMAL COMPLAINT

REQUESTED BY: RR. GANDY SUPERVISOR L. P. GALIE

Table with columns: READING DATE, READING, K.W. HRS., MDS. BILL, KVA DEMAND, BILLING (NET BILLING, SALES TAX), DUE DATE OR PROC. DATE, TOTAL AMOUNT CHARGED, TYPE OF TRANS., PROCESS DATE, TOTAL AMOUNT CREDITED. Rows include dates from 11-79 to 12-80 and amounts like 392.01, 32.30, 37.26, etc.

POOR ORIGINAL

Summary section: TRANSACTION AND DATE, TOTAL CHARGES 776.73, TOTAL CREDITS 375, DEBIT BALANCE 1151.73, CREDIT BALANCE -. Includes a list of transaction codes and a note about separate lines for entries.

(FOR SUSPENSE TRANSFERS, SHOW BOTH A DEBIT AND CREDIT ENTRY FOR TRANSACTION.)

DATE: _____ 19__

NAME _____ TEL. NO. _____
 USING ADDRESS **POOR ORIGINAL**
 MAILING ADDRESS _____

CUSTOMER ACCOUNTING DEPT. - PLEASE FURNISH THE FOLLOWING INFORMATION:

DUPLICATE BILL FOR AMOUNT OWING DELINQUENT NOTICE—DATE PAID CREDIT NOT SHOWN ON BILL
 STATEMENT OF ACCT. _____ MONTHS EXPLAIN OTHER CHARGES OF \$ _____ OTHER DATA—SPECIFY
 SECURITY DEPOSIT \$ _____ DATE REFUNDED _____ VOUCHER NO. _____

REQUESTED BY: _____ SUPERVISOR _____

READING DATE	READING	K.W. HRS.	MOS BILL	KVA DEMAND	BILLING		DUE DATE OR PROC. DATE	TOTAL AMOUNT CHARGED	TYPE OF TRANS.	PROCESS DATE	TOTAL AMOUNT CREDITED
					NET BILLING	SALES TAX					
					11.80			401.73	99		
											5.10
11-80	5836	540	1.00		37.03		7-9-80	37.03	10	7-10-80	35.00
							7-16-80	4.10	51		
11-80	6882	552	1.00		38.29		8-1-80	38.29	01	7-28-80	35.00
									41	8-11-80	35.00
							8-15-80	3.82	51		
11-80	6926	528	1.00		36.96		9-8-80	36.96	10	8-25-80	30.00
							9-2-80	3.95	51		
10-80	6980	618	1.00		44.69		10-8-80	44.69	01	9-20-80	35.00
									41	10-9-80	35.00
							10-14-80	3.62	51		
11-80	7018	456	1.00		37.76		11-5-80	37.76	10		
							11-13-80	4.05	51		
12-80	7085	804	1.00		55.13		12-9-80	55.13	01		
									01	11-25-80	50.00
							1-5-81	4.44	51		
1-13-80	7132	564	1.00		40.01		1-7-81	40.01	10		
DATE	INTERIM	CONSTANT	* TRANSACTION AND DATE				TOTAL CHARGES	714.82	TOTAL CREDITS		315.00
PREPARED BY:					(1) REGULAR BILLING, SHOW DUE DATE.	DEBIT BALANCE	399.82	CREDIT BALANCE			
DATE	TEL NO.					(21) OFF CYCLE BILLING, SHOW DUE DATE.					
						(51) DISCOUNT CHARGED, SHOW DATE OF LAST CASH APPLIED.					
						(41) CASH PAYMENT, SHOW CASH DATE.					
						(62) WISE ADJUSTMENT, SHOW PROCESS DATE. INDICATE DETAIL TYPE (13, 18, 22, ETC.) AND WRITE DESCRIPTION.					

NOTE:
 USE A SEPARATE LINE TO LIST EACH ENTRY MADE TO ACCOUNT IN EXACT SEQUENCE BY DATE OF ENTRY. SHOW EXACT ACCOUNT BALANCE AND INDICATE IF IN SUSPENSE.

DATE _____ 19__

NAME _____ TEL. NO. _____
 USING ADDRESS _____
 MAILING ADDRESS _____

POOR ORIGINAL

3064

CUSTOMER ACCOUNTING DEPT. -- PLEASE FURNISH THE FOLLOWING INFORMATION:

DUPLICATE BILL FOR AMOUNT OWING DELINQUENT NOTICE--DATE PAID CREDIT NOT SHOWN ON BILL
 STATEMENT OF ACCT. _____ MONTHS EXPLAIN OTHER CHARGES OF \$ _____ OTHER DATA--SPECIFY _____
 SECURITY DEPOSIT \$ _____ DATE REFUNDED _____ VOUCHER NO. _____

REQUESTED BY: _____ SUPERVISOR _____

READING DATE	READING	K.W. HRS.	MOS. BILL	KVA DEMAND	BILLING		DUE DATE OR PROC. DATE	TOTAL AMOUNT CHARGED	TYPE OF TRANS.	PROCESS DATE	TOTAL AMOUNT CREDITED
					NET BILLING	SALES TAX					
					A Bal			399.82	99		
							1-13-81	4.94	51		
2-81	7226	1128	1.00		76.18		2-5-81	76.18	01		
							2-13-81	5.57	51		
							3-10-81	40.47	100		
									41	2-10-81	35
10-81	7274	878	1.00		40.47		3-10-81	40.47	100		
									41	2-24-81	35
									41	3-10-81	35
							3-16-81	5.27	51		
11-81	7348	888	1.00		62.77		4-8-81	62.77	01		
									41	3-25-81	25
									41	4-9-81	35
							4-11-81	5.38	51		
1-81	7300	810	1.00		42.79		5-1-81	42.79	100		
							5-13-81	5.91	51		
									41	5-14-81	35
11-81	7444	570	1.00		44.14		6-8-81	44.14	01		
									41	5-27-81	35
									41	6-6-81	90
									41	6-11-81	60
							6-12-81	3.85	51		
6-11-81	7410	510	1.00		42.49		7-8-81	42.49	100		
									41	6-25-81	35

DATE _____ INTERIM _____ CONSTANT _____
 REPAIRED BY _____
 DATE _____ TEL. NO. _____

- * TRANSACTION AND DATE**
 (1) REGULAR BILLING. SHOW DUE DATE.
 (2) OFF CYCLE BILLING. SHOW DUE DATE.
 (3) DISCOUNT CHARGED. SHOW DATE OF LAST CASH APPLIED.
 (4) CASH PAYMENT. SHOW CASH DATE.
 (6) MISC. ADJUSTMENT. SHOW PROCESS DATE. INDICATE DETAIL TYPE (13, 18, 22, ETC.) AND WRITE DESCRIPTION.

TOTAL CHARGES	739.57	TOTAL CREDITS	470
DEBIT BALANCE	319.57	CREDIT BALANCE	

NOTE:
 USE A SEPARATE LINE TO LIST EACH ENTRY MADE TO ACCOUNT IN EXACT SEQUENCE BY DATE OF ENTRY. SHOW EXACT ACCOUNT BALANCE AND INDICATE IF IN SUSPENSE.

DAY _____ 19____

TEL. NO. _____

NAME _____

USING ADDRESS _____

MAILING ADDRESS **POOR ORIGINAL** *4044*

CUSTOMER ACCOUNTING DEPT. - PLEASE FURNISH THE FOLLOWING INFORMATION:

- DUPLICATE BILL FOR AMOUNT OWING
 DELINQUENT NOTICE - DATE PAID
 CREDIT NOT SHOWN ON BILL
 STATEMENT OF ACCT. _____ MONTHS
 EXPLAIN OTHER CHARGES OF \$ _____
 OTHER DATA - SPECIFY _____
 SECURITY DEPOSIT \$ _____
 DATE REFUNDED _____
 VOUCHER NO. _____

REQUESTED BY: _____ SUPERVISOR _____

READING DATE	READING	K.W. HRS.	MOS. BILL	KVA DEMAND	BILLING		DUE DATE OR PROC. DATE	TOTAL AMOUNT CHARGED	TYPE OF TRANS.	PROCESS DATE	TOTAL AMOUNT CREDITED
					NET BILLING	SALES TAX					
								319.58	44		
							7/12/71	3.56	51	7/13/81	35.00
7/10/71	7527	444	1.00		35.05		8/20/71	35.05	01		

POOR ORIGINAL

RATE _____ INTERIM _____ CONSTANT _____
 PREPARED BY: _____
 DATE _____ TEL NO _____

- * TRANSACTION AND DATE**
- (1) REGULAR BILLING. SHOW DUE DATE.
 - (2) OFF CYCLE BILLING, SHOW DUE DATE.
 - (3) DISCOUNT CHARGED. SHOW DATE OF LAST CASH APPLIED.
 - (4) CASH PAYMENT. SHOW CASH DATE.
 - (6) MISC. ADJUSTMENT. SHOW PROCESS DATE. INDICATE DETAIL TYPE (13, 18, 22, ETC.) AND WRITE DESCRIPTION.

TOTAL CHARGES	350.19	TOTAL CREDITS	35.00
DEBIT BALANCE	323.19	CREDIT BALANCE	

NOTE:
USE A SEPARATE LINE TO LIST EACH ENTRY MADE TO ACCOUNT IN EXACT SEQUENCE BY DATE OF ENTRY. SHOW EX ACCOUNT BALANCE AND INDICATE IF IN SUSPENSE.

(FOR SUSPENSE TRANSFERS, SHOW BOTH A DEBIT AND CREDIT ENTRY FOR TRANSACTION.)

DECISION ON INFORMAL COMPLAINT
BUREAU OF CONSUMER SERVICES, MEDIATION UNIT
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P. O. BOX 3265, HARRISBURG, PA 17120

Refer to:
S.T. 91612

Omega Gray
2298 Wilner Drive
Pgh., PA 15221

08-689354-1

v.

Duquesne Light Co.

244-9391

This customer contacted the Mediation Unit on June 23, 1981.
After speaking with the customer and company, the Mediation Unit has
decided that the customer will make the following payments to the
company for the amount owed of \$354.58. The customer shall pay
beginning 7/81, \$35 every other week (\$70 per month), until the
account is paid in full.

If the customer does not make these payments, the company can terminate
service after providing all required notices (52 PA Code, Chapter 56,
856.93-99).

If the customer or the company is not happy with this decision, a hear-
ing with the P.U.C. can be requested. To request a hearing, you must
clip off the bottom of this paper, fill in the blanks, and mail it
back to the P.U.C. at the address shown at the top of this paper within
TEN (10) DAYS of this date _____

JUN 25 1981
Michael J. Smith
Consumer Service Representative

If you are not happy with the decision and you are returning the bottom
of this paper, you MUST continue to pay bills for service which you will
receive each month from the company. If you do not pay the monthly
bills, the company may terminate your service before you have your hearing.

REQUEST FOR APPEAL FROM MEDIATION DECISION

I want to file a formal complaint and have a hearing with the P.U.C.
Please send me the formal complaint forms at the following address:

(Please print information below)

Name _____

91612
S.T. Number

Street _____

Telephone # _____

City, State _____

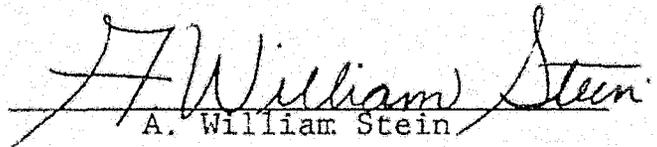
Exhibit B

Zip Code
JUN 25 1981

CERTIFICATE OF SERVICE

I hereby certify that I have this day served the foregoing documents upon all parties of record in this proceeding in accordance with the requirements of 1 Pa. Code §33.32 (relating to service by a participant) and 52 Pa. Code §3.62 (relating to service).

Dated at this 11th day of August, 1981.


A. William Stein

Of Counsel for

DUQUESNE LIGHT COMPANY

COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P. O. BOX 3265, HARRISBURG, Pa. 17120

September 8, 1981

IN REPLY PLEASE
REFER TO OUR FILE

MONITOR: CHAIRMAN SHANAMAN

Z-8191612

(See Attached List)

Omega Gray
v.
Duquesne Light Company

H E A R I N G N O T I C E

HEARING DATE: Wednesday, October 21, 1981

TIME OF HEARING: 11:00 a.m.

PLACE OF HEARING: Sixth Floor Hearing Room
Buhl Building
204 Fifth Avenue
Pittsburgh, Pennsylvania

PRESIDING OFFICER: Administrative Law Judge Joseph I. Lewis
Third Floor, Buhl Building
204 Fifth Avenue
Pittsburgh, Pennsylvania 15222
(412) 565-3550

According to the law (66 Pa. C.S.A. §332(g)), this hearing must be held by November 12, 1981.

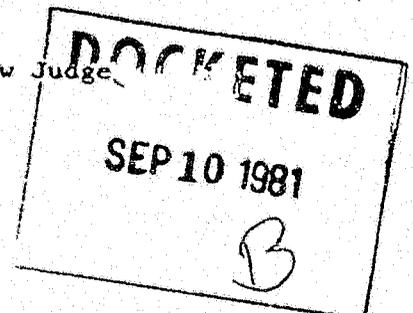
ATTENTION CUSTOMER: IF YOU DO NOT COME TO THIS HEARING,
YOU MAY LOSE THE CASE AND BE FORCED
TO PAY YOUR BILL BASED ON A PAYMENT
PLAN SUGGESTED BY THE UTILITY
COMPANY.

If you have a problem with the scheduling of this case, please contact William Shane at (717) 787-1191 on or before October 14, 1981.

cc: Judge Lewis
Bramson
Consumer Advocate
Law Bureau
Lawrence
Long
File Room

William R. Shane
Chief Administrative Law Judge

Certified Mail
Receipt Requested



Omega Gray
2298 Wilner Drive
Pittsburgh, PA 15221

A. William Stein, Esquire
Duquesne Light Company
435 Sixth Avenue
Pittsburgh, PA 15219

PS Form 3811, Jan. 1979

SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one)
- Show to whom and date delivered..... c
 - Show to whom, date and address of delivery... c
 - RESTRICTED DELIVERY
Show to whom and date delivered.....
 - RESTRICTED DELIVERY.
Show to whom, date, and address of delivery \$ _____

(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
OMEGA GRAY
2-8191612

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	44635	

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE Addressee Authorized agent

4. DATE OF DELIVERY: *1987* POSTMARK: *SEPT 16 1987*

X Omega Gray

5. ADDRESS (Complete only, if requested)

6. UNABLE TO DELIVER BECAUSE:

CLERK'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

HEARING REPORT

DOCKET Z-8191612

ALJ Reno

LOCATION Pgh., Pa

Hearing date(s) Oct 21, 1981

time begun _____ ended _____

CHECK THOSE BLOCKS WHICH APPLY:
^{11⁰⁰Am}

Hearing concluded ✓

Record closed ✓

Briefs to be filed _____

Further hearing _____

Estimated add'l days _____

BENCH DECISION ✓

REMARKS: Complaint dis-

missed -

Jd R

V.V.D.

APPEARANCE SHEET

Docket No. 2-8191612

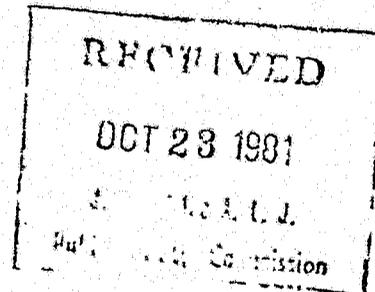
In re:

Omega Gray
v.
Duquesne Light Company

Pennsylvania

Public Utility Commission

Harrisburg, Pa.



Following are the names of parties or counsel of record, with their post-office address, appearing at the hearing in the above entitled proceeding, held in Pittsburgh, PA 15222

on October 21, 1981.

ORDER

Please Print Clearly
Incomplete Information May Result in Delay of Process

NAME	ADDRESS	APPEARING FOR			
<i>Omega Gray 2298 Melrose Dr. Pgh - Pa. 15211</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">Zip</td> </tr> </table>	City	State	Zip	<i>[Handwritten initials]</i>
City	State	Zip			
<i>A. William Stern</i>	<i>435 Sixth Ave</i>	<i>Duquesne Light Company</i>			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City <i>PGH</i></td> <td style="width: 33%;">State <i>PA</i></td> <td style="width: 33%;">Zip <i>15219</i></td> </tr> </table>	City <i>PGH</i>	State <i>PA</i>	Zip <i>15219</i>	
City <i>PGH</i>	State <i>PA</i>	Zip <i>15219</i>			
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City	State	Zip			

Check this box if additional parties or counsel of record appear on back.

A. [Handwritten Name]
Reporter