



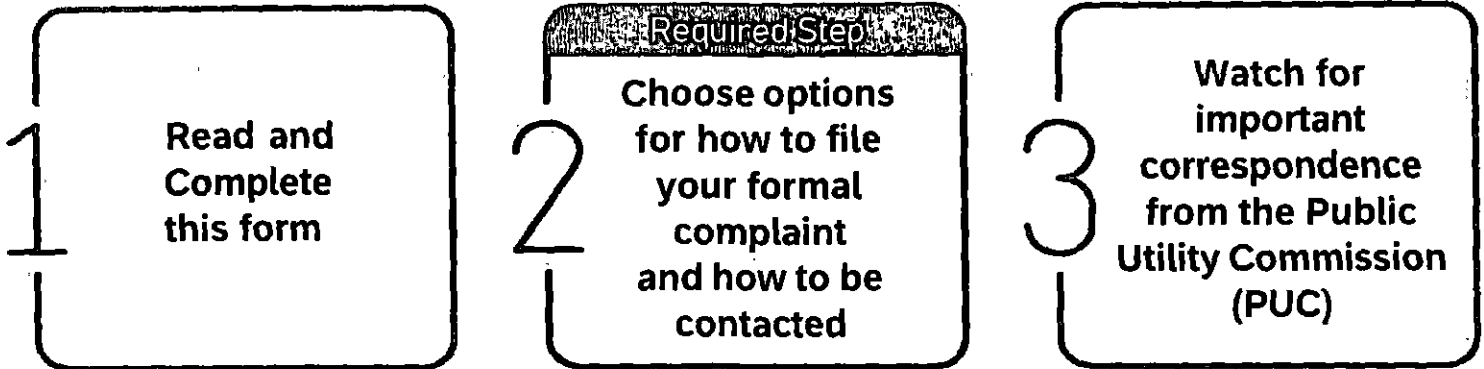
PENNSYLVANIA PUBLIC UTILITY COMMISSION

RCVD PUC SEC BUR DEC 1 2023 AM 11:03

C-2023-3044125

FORMAL COMPLAINT - PRINTABLE FORM

Filing this form begins a legal proceeding and you will be a party to the case. If you do not wish to be a party to the case, consider filing an informal complaint.



Please legibly complete this form in ink.

1. CUSTOMER (COMPLAINANT) INFORMATION

Provide your contact information and utility account number. It is your responsibility to update the PUC with any changes to your address and to where you want documents sent to you.

Name Gloria Lilly  
 Street/P.O. Box 5214 Buxton St Apt# \_\_\_\_\_  
 City Phila. P State Pa Zip 19124  
 County \_\_\_\_\_

Telephone Number(s) Where We Can Contact You During the Day:  
 Home: ( ) 415-226-2389 Mobile: ( ) \_\_\_\_\_  
 Email Address gloria.lilly27@gmail.com  
 Utility Account Number (from your bill) 0484968792 0484968792

If your complaint involves utility service provided to a different address or in a different name than your mailing address, please list this information below.

Name Phila Gas Works  
 Street/P.O. Box P.O. Box 11700 Apt# \_\_\_\_\_  
 City Newark NJ, 07101 State \_\_\_\_\_ Zip \_\_\_\_\_

## 2. NAME OF UTILITY OR COMPANY (RESPONDENT)

Provide the full name of the utility or company about which you are complaining. The name of your utility or company is on your bill.

Phila Gas Works PO Box 11700 Newark, NJ 07101

## 3. TYPE OF UTILITY SERVICE

Check the box listing the type of utility service that is the subject of your complaint (check only one):

- |   |  |
|---|--|
| <input type="checkbox"/> Electric         | <input type="checkbox"/> Storm Water   |
| <input checked="" type="checkbox"/> Gas   | <input type="checkbox"/> Steam Heat  |
| <input type="checkbox"/> Water            | <input type="checkbox"/> Motor Carrier (taxi, moving company, limo)          |
| <input type="checkbox"/> Wastewater/Sewer | <input type="checkbox"/> Telephone/Telecommunications (local, long distance) |

Note: The PUC does not regulate high-speed internet service, cell phones or cable TV.

## 4. REASON FOR COMPLAINT

What kind of problem are you having with the utility or company?

Check all boxes below that apply and state the reason for your complaint. Explain specifically what you believe the utility or company has done wrong. Provide relevant details including dates, times and places and any other information that may be important. If the complaint is about billing, tell us the amount you believe is not correct. Use additional paper if you need more space. Your complaint may be dismissed without a hearing if you do not provide specific information.

- The utility is threatening to shut off my service or has already shut off my service.
- I would like a payment agreement.
- Incorrect charges are on my bill. Provide dates that are important and an explanation about any amounts or charges that you believe are not correct. Attach a copy of the bill(s) in question if you have them.
- I am having a reliability, safety or quality problem with my utility service. Explain the problem, including dates, times or places and any other relevant details that may be important.
- Other (explain) I Believe Using My Lineup  
and Gas Company there say shut  
My Gas off for hundred dollars  
and wouldn't put an plan

## 5. REQUESTED RELIEF

How do you want your complaint to be resolved?

Explain what you want the PUC to order the utility or company to do. Use additional paper if you need more space.

I Believe using My Cap & Linerap  
I having hard time getting there  
Shut Gas of and give plan and this  
This Time I Been try to get help  
I don't due Anything online and  
Sent information for Gas online

Note: The PUC can decide that a customer was not billed correctly and can order billing refunds. The PUC can also fine a utility or company for not following rules and can order a utility or company to correct a problem with your service. Under state law, the PUC cannot decide whether a utility or company should pay customers for loss or damages. Damage claims may be sought in an appropriate civil court.

## 6. PROTECTION FROM ABUSE (PFA)/DOMESTIC VIOLENCE

Has a court granted you a PFA order or any other order which provides clear evidence of domestic violence against you that is currently in effect for your personal safety or welfare? The PUC needs this information to properly process your complaint so that your identity is not made public.

Has a court granted a PFA order or any other order for your personal safety or welfare?

Yes      If your answer is "yes," attach a copy of the current PFA order to this Formal Complaint form. *Due to the confidential nature of the PFA, you cannot eFile your Formal Complaint. You will need to print out this form and mail it to the Secretary of the Commission.*

No

Note: You MUST answer this question if your complaint is against a natural gas distribution utility, an electric distribution utility or a water distribution utility AND your complaint is about a problem involving billing, a request to receive service, a security deposit request, termination of service or a request for a payment agreement.

## 7. PRIOR UTILITY CONTACT

a. Is this an appeal from a decision of the PUC's Bureau of Consumer Services (BCS)?

Yes

No

Note: If you answered yes, move to Section 8. No further contact with the utility or company is required. If you answered no, answer the question in Section 7 b. and answer the question in Section 7 c. if relevant.

b. If this is not an appeal from a BCS decision, have you spoken to a utility or company representative about this complaint?

Yes

No

Note: You MUST contact the utility first if (1) you are a residential customer, (2) your complaint is against a natural gas distribution utility, an electric distribution utility or a water utility AND (3) your complaint is about a billing problem, a service problem, a termination of service problem, or a request for a payment agreement.

c. If you tried to speak to a utility company representative about your complaint but were not able to do so, please explain why.

I ask for help and  
due online and they said help  
me for payment plan or Litkup

Note: Even if you are not required to contact the utility or company, you should always try to speak to a utility or company representative about your problem before you file a Formal Complaint with the PUC.

## 8. TWO OPTIONS TO FILE YOUR FORMAL COMPLAINT — CHOOSE ONE

### **OPTION 1**

Electronically by eFile

One option is to create an account on the PUC's eFiling system, or, use your existing eFiling account. This is the quickest and easiest way to receive, file and submit documents.

eFiling permits consumers, utilities and attorneys to file certain documents electronically with the PUC without filing paper copies, serve documents electronically on other parties if they agree to such service, and to receive electronic service of documents from the PUC.

You agree to open and use an eFiling account - free of charge through the PUC's website. By selecting this method, you will electronically receive documents.

Visit <https://efiling.puc.pa.gov/> to learn more and create an eFiling account.

You will automatically receive eService with your eFiling account.

### **OPTION 2**

Mail

Mail the completed form with your original signature and any attachments to this address and retain the tracking information as proof of submission:

Secretary  
Pennsylvania Public Utility Commission  
400 North Street  
Harrisburg, Pennsylvania 17120

If you select the option to mail your formal complaint, you are required to select the method by which you would like the PUC to communicate with you. You must choose one of the three options on the next page for ways you would like to receive documents.

## 9. THREE OPTIONS TO RECEIVE DOCUMENTS — CHOOSE ONE

It is REQUIRED to select ONE of the following options for receiving all hearing notices, orders and related documents from the PUC:

### OPTION 1

**eFILING:** This is the quickest and easiest way to receive all documents. You agree to open and use an eFiling account - free of charge through the PUC's website. By selecting this method you will electronically receive documents. To create an eFiling account, visit <https://efiling.puc.pa.gov/>.

You will automatically receive eService with your eFiling account.

### OPTION 2

**FIRST CLASS MAIL:** You agree to receive all documents by First Class Mail (using the address you provided on Page 1).

Check the box and initial here GL if you are selecting FIRST CLASS MAIL service.

### OPTION 3

**EMAIL:** You agree to receive all documents by email (using the email address you provided on page 1). Keep in mind, you will only be able to receive documents by email from the PUC. You will not be able to email documents to the Commission.

To file documents, you must submit them through an eFiling account or mail them. To create an eFiling account, visit <https://efiling.puc.pa.gov/>.

Check the box and initial here \_\_\_\_\_ if you are selecting EMAIL service.

Please Note: It is important to select ONE of the three options above.

IF AN OPTION IS NOT SELECTED, THIS MAY DELAY THE PROCESSING OF YOUR COMPLAINT.

*I Don't Do Any of My Bills  
ONline I had Data Breaches*

**10. LEGAL REPRESENTATION**

If you are filing a Formal Complaint as an individual on your own behalf, you are NOT required to have a lawyer. You may represent yourself at the hearing.

If you are already represented by a lawyer in this matter, provide your lawyer's contact information, which is required. Please make sure your lawyer is aware of your complaint. If represented by a lawyer, both you and your lawyer must be present at your hearing.

Lawyer's Name \_\_\_\_\_

Street/P.O. Box \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Note: Corporations, associations, partnerships, limited liability companies and political subdivisions are required to have a lawyer represent them at a hearing and to file any motions, answers, briefs or other legal pleadings.

**11. VERIFICATION AND SIGNATURE**

You MUST sign and date your complaint. If you file by mail, you must sign your name in ink on the line provided below. Date the form. If you do not sign with your original signature and date, the PUC will not accept your complaint.

Verification:

I Colleen Lilly, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Colleen Lilly  
(Signature of Complainant)

Nov. 21, 2023  
(Date)

\_\_\_\_\_  
Title of authorized employee or officer (only applicable to corporations, associations, partnerships, limited liability companies or political subdivisions)

Note: If the Complainant is a corporation, association, partnership, limited liability company or political subdivision, the verification must be signed by an authorized officer or authorized employee. If the Formal Complaint is not signed by one of these individuals, the PUC will not accept it.

## APPEALING A BCS DECISION?

If you are appealing a BCS decision: follow the directions in the cover letter you received from the PUC Secretary's Bureau with the formal complaint form. ONLY formal complaints appealing a BCS decision can be filed by fax, email or overnight delivery to meet filing deadlines. All other formal complaints MUST be eFiled or mailed.

## QUESTIONS?

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

## REMINDERS

- Keep a copy of your Formal Complaint for your records.
- If you are electronically filing your Formal Complaint through eFiling, you will need to scan the document and save it as a PDF.
- You may add any additional information, such as copies of bills, as one (1) separate attachment to your complaint.
- To protect your personal information, please know that your complaint form and the utility's answer will not be published to the PUC's website.
- Check the Consumer Complaints Procedures Guide for checklists and tips to help you successfully follow the complaint-filing process.  
(<https://www.puc.pa.gov/media/1492/consumer-complaints-procedures-guide-2021.pdf>)
- Once your complaint case moves to the PUC's Office of Administrative Law Judge, any filings you make should be marked confidential if you do not want them published to the website.



10-DAY SHUT OFF NOTICE
Your Gas Service May Be Shut Off

Your bill is past due. As a result, PGW will shut off gas to 5214 BURTON ST on or after 8 a.m. on May 31, 2023. This notice will remain effective for 60 days. To talk about your bill or this notice, call our office at 215-235-1777.

We will not shut off gas if you do ONE of the following:

- Pay your past due amount of \$217.62.
Pay the amount you owe on your most recent payment plan.
Make a payment arrangement (you may be eligible for a special assistance program).
Contact us to dispute the bill.

At a minimum, you may have to pay all of the following before we turn your service on:

Table with 2 columns: Item, Amount. Rows: Past Due Amount (\$217.62), Security Deposit (\$198.00), Turn On Charge (\$123.23), Total (\$538.85)

Plus \$372.00 if we must dig up the street.

You are also responsible for all gas service provided to you that is now or has become past due. If shut off, you may be required to pay more than the amount on this notice to have gas turned on.

MEDICAL EMERGENCY NOTICE

LET US KNOW IF SOMEONE LIVING IN YOUR HOME IS SERIOUSLY ILL OR HAS A MEDICAL CONDITION. WE WILL NOT SHUT OFF YOUR SERVICE during such illness, provided you:

- 1. Have your licensed physician, physician's assistant or nurse practitioner certify in writing that such an illness exists and that it may be aggravated if your service is stopped; and
2. Make arrangements to pay your current bills.
3. Contact us by calling 215-235-1777.
4. HAVE A LICENSED PHYSICIAN, PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER SEND PGW A LETTER WITHIN 3 DAYS, VERIFYING THE MEDICAL CONDITION.

If you are a victim of abuse and have an order issued by the courts, special medical emergency procedures and protections may be available. Call us immediately at 215-235-1000 to inform us so these special procedures and protection can be provided. You will be required to provide us with a copy of the court order.

IMPORTANT TO KNOW - BEFORE WE SHUT OFF YOUR GAS SERVICE

- You may be eligible for a payment agreement or special assistance program. Enrollment into this program may be a way of avoiding shut off. Contact us immediately at 215-235-1777 to find out if you're eligible, and how to enroll. Documentation of your income may be required.
If you have questions or need more information, please call us today at 215-235-1777 or write us at P.O. Box 3500, Philadelphia, PA 19122. After you talk with PGW, if you are not satisfied, you may file a complaint with the Pennsylvania Public Utility Commission (PUC). The PUC may delay the shutoff if you file the complaint before the shut-off date. To contact them call 1 (800) 692-7380 or write to: Pennsylvania Public Utility Commission, P.O. Box 3265, Harrisburg, PA 17105-3265.

- Call us if your landlord pays your utility bill. You have certain legal protections.
If you have trouble understanding or speaking English call us for free interpretation.
Please contact us if you are disabled and need assistance.
All adult occupants of the premises whose names are on the mortgage, deed or lease are considered the 'customer' and are responsible for payment of the bill.
If service is shut off, ANY adult occupant who has been living at the premises may have to pay all or portions of this bill to have service restored.
If your service is shut off, you must contact us after your payment has been made to be sure you have met all conditions to have the service turned on and to arrange access to your premises. It may take up to seven days to have your service restored.
If you have a valid Protection From Abuse order or an order issued by a court of competent jurisdiction in this Commonwealth that provides clear evidence that you are a victim of domestic violence, there are additional protections available to you. Call us immediately at 215-235-1000. You will be required to provide us with a copy of the order.

WINTER SHUT OFF PROVISIONS Dec. 1-March 31

- Contact us before the shut off date to give us household and occupant information to see if you qualify for any assistance programs.
If you are low income there are special rules about whether we may shut off your gas in the winter. Add together the monthly income in your household. Look at the chart below to determine your group. You may need to provide us with proof of income.
If your income is 150% of the federal poverty guidelines or below, we must first ask the PUC for permission to shut off your service. We will notify you prior to shutting off service if we ask the PUC for permission to terminate your gas service.
If your income is above 150% but does not exceed 250% of the federal poverty guidelines, we will not shut off your service if one of these conditions applies to you:
o Someone in your household is 12 or younger or 65 or older; or
o You have paid at least one-half of your last two monthly gas bills; or
o If over the last two months you have paid at least 15% of your household income toward the gas bills.
If we reconnect your service during the winter months (between December 1st and March 31st) we will restore your service within 24 hours of you meeting all requirements to have service reconnected. When street digging is required, it may take up to seven days.

Federal Poverty Guidelines (FPG) 2023

Table with 3 columns: Household Size, Your income is 150% of the FPG or below if your monthly gross is, Your income is between 151% - 250% of the FPG if your monthly gross is. Rows: 1, 2, 3, 4, Each add. person add.

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Please return this portion with your payment. Write your account number on your check or money order made payable to Philadelphia Gas Works



Place "X" in box for address corrections. Print corrections on reverse side.

Account Number: 0484968792
Notice Date: May 19, 2023
Please Pay: \$217.62

Amount Enclosed: \$

000037 000000127



GLORIA LILLY
5214 BURTON ST
PHILA PA 19124-1502



Philadelphia Gas Works
P.O. Box 11700
Newark, NJ 07101-4700

RCVD PUC SEC BUR
DEC 1 2023 AM 11:03

**AVISO DE DESCONEXIÓN EN 10 DÍAS**  
**¡Es posible que se desconecte su servicio de gas!**

Debido a que su factura está vencida, desconnectaremos su servicio de gas a 5214 BURTON ST a las 8:00 AM del May 31, 2023 o más tarde. Este aviso permanecerá en vigencia durante 60 días. Para hablar de su factura o de este aviso, llame a nuestra oficina al 215-235-1777.

**No desconnectaremos el gas si hace UNO de los siguientes:**

- Pague su monto vencido de \$217.62.
- Pague la cantidad que debe en su plan de pago más reciente
- Hace un acuerdo de pago o es posible que califique para un program de ayuda especial.
- Se comunica con nosotros para disputar la factura.

**Como mínimo, tendrá que pagar todo lo siguiente antes de que desconnectemos su servicio el:**

Importe vencido	\$217.62
Depósito de seguridad	\$198.00
Cargo de reconexión	\$123.23
Total	\$538.85

(Mas \$372.00 si tenemos que perforar la calle para desconnectar el gas).

**Usted también es responsable de todo el servicio de gas que fuera proporcionado y cuyo pago ahora está atrasado. Si se desconecta su servicio, es posible que se le pida que pague más que el importe de este aviso para que se le reconecte el gas.**

**AVISO DE EMERGENCIA MÉDICAS**

AVÍSENOS SI ALGUIEN QUE VIVE EN SU CASA ESTÁ GRAVEMENTE ENFERMO O TIENE UN PROBLEMA MÉDICO. NO LE DESCONNECTAREMOS EL SERVICIO durante dicha enfermedad si usted:

1. Haga que su médico, asistente médico o enfermero practicante con licencia certifique por escrito que dicha enfermedad existe y que puede agravarse si se interrumpe su servicio.
2. Hace arreglos para pagar sus cuentas actuales.
3. Se comunica con nosotros al 215-235-1777.
4. SU MÉDICO, ASISTENTE DE MÉDICO O ENFERMERA CON LICENCIA PARA EJERCER DEBERÁ ENVIAR UNA CARTA A PGW EN UN PLAZO DE 3 DÍAS PARA VERIFICAR SU ENFERMEDAD O PROBLEMA MÉDICO.

Si usted es víctima de abuso y tiene una orden emitida por los tribunales, es posible que haya disponibles protecciones y procedimientos especiales de emergencia médica. Llámenos inmediatamente al 215-235-1000 para informarnos para que se puedan proporcionar estos procedimientos y protecciones especiales. Se le pedirá que nos proporcione una copia de la orden judicial.

**COSAS IMPORTANTES QUE DEBE SABER - ANTES DE QUE DESCONNECTEMOS SU SERVICIO DE GAS**

• Comuníquese inmediatamente con nosotros llamando al 215-235-1777 para determinar cómo entrar en un arreglo de pago (si es elegible) y adónde se puede encontrar solicitudes y adónde se las puede presentar para la inscripción en uno de nuestros programas universales de servicios.

• Si tiene preguntas o necesita más información, llámenos hoy mismo al 215-235-1777 o escribanos a P.O. Box 3500, Philadelphia, PA 19122. Attn: Correspondence Department. Si no está satisfecho después de hablar con nosotros, puede presentar una queja ante la Comisión de Servicios Públicos (Public Utility Commission, PUC). La PUC puede demorar la desconexión si presenta la queja antes de la fecha de la desconexión. Para comunicarse con ellos llame al 1 (800) 692-7380 o escriba a: Pennsylvania Public Utility Commission, Box 3265, Harrisburg, PA 17105-3265.

• Es posible que sea elegible para un acuerdo de pago o para programas de ayuda especiales y la inscripción en este programa tal vez sea una manera de evitar la desconexión. Llame al 215-235-1777 inmediatamente para proporcionarnos los ingresos de su grupo familiar y la información de los ocupantes. Es posible que se requiera documentación de sus ingresos, como recibos de pago o documentos de impuestos.

**Electronic Check Recovery Authorization**

When you pay by check, preauthorized bank draft, ACH, or by a telephone authorized transaction you expressly authorized PGW, if your check is dishonored or returned for any reason, to electronically debit your account for the amount of the check plus a processing fee not to exceed the state maximum legal limit (plus all applicable sales tax). The use of a check for payment is your acknowledgement of this policy and its terms.

- Llámenos si la persona que le alquila la propiedad paga sus facturas de servicios públicos. Usted tiene ciertas protecciones legales.
- Si tiene problemas para entender o hablar el inglés, llámenos para conseguir una interpretación gratis.
- Por favor comuníquese con nosotros si está discapacitado y necesita ayuda.
- Si se desconecta su servicio, es posible que se le exija que pague cualquier factura adicional que esté vencida para reponer su servicio.
- Se considera "el cliente" a todos los ocupantes adultos de las instalaciones cuyos nombres figuren en la hipoteca, el título de propiedad o el alquiler, y son responsables del pago de la factura.
- Si se desconecta el servicio es posible que CUALQUIER adulto que haya vivido en las instalaciones deba pagar toda la factura o parte de la misma para que se reconecte el servicio.
- Si se desconecta el servicio, se debe comunicar con nosotros después de haber hecho el pago para asegurarse de que se haya cumplido con todas las condiciones para la reconexión del servicio y coordinar el acceso a sus instalaciones. Es posible que se demore hasta siete días en reconectar su servicio.

• Si tiene una orden de protección contra el abuso válido o una orden emitida por un tribunal de jurisdicción competente en este Estado Libre Asociado que brinda evidencia clara de que usted es víctima de violencia doméstica, hay protecciones adicionales disponibles para usted. Llámenos inmediatamente al 215-235-1000. Se le pedirá que nos proporcione una copia de la orden.

**DISPOSICIONES PARA LA DESCONEXIÓN EN INVIERNO del 1 de diciembre al 31 de marzo**

• Comuníquese con nosotros antes de la fecha de desconexión para darnos la información del grupo familiar y de los ocupantes para ver si califica para alguno de los programas de ayuda.

• Si tiene ingresos bajos, hay reglas especiales sobre si podemos o no desconnectar su gas durante el invierno. Sume todos los ingresos mensuales de su grupo familiar. Mire la tabla a continuación para determinar su grupo. Es posible que nos deba proporcionar una prueba de sus ingresos.

• Si sus ingresos son iguales al 150% de las Directrices Federales de Pobreza o menores, primero tenemos que pedir autorización a la PUC para desconnectar su servicio. Le avisaremos antes de desconnectar el servicio si le pedimos autorización a la PUC para desconnectar su servicio de gas.

• Si sus ingresos son mayores del 150% pero no exceden el 250% de las Directrices Federales Federales de Pobreza, no le desconnectaremos el servicio si una de estas condiciones se aplica a usted:

- o Alguien en el grupo familiar tiene 12 años de edad o es menor o tiene 65 años o es mayor, o
- o Usted ha pagado por lo menos la mitad de sus dos últimas facturas mensuales de gas; o
- o Si durante los dos últimos meses ha pagado por lo menos el 15% de los ingresos de su grupo familiar para las facturas de gas.

**Directrices Federales de Pobreza (FPG) 2023**

Tamaño del grupo familiar incluyendo niños	Sus ingresos mensuales son el 150% de la FPG o inferiores si son de:	Su ingreso está comprendido entre el 151% y el 250% del FPG si su ingreso mensual es:
1	\$1,823 o menos	\$1,824-\$3,038
2	\$2,465 o menos	PL 2023-0000001102-74-000000127
3	\$3,108 o menos	\$3,109-\$5,179
4	\$3,750 o menos	\$3,751-\$6,250
Cada persona adicional agrega	\$643	\$644-\$1,071

**Mailing Address**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (\_\_\_\_\_) \_\_\_\_\_

• Si le desconnectamos el servicio durante los meses de invierno (entre el 1 de diciembre y el 31 de marzo) le restableceremos el servicio dentro de 24 horas de haber cumplido con todos los requisitos para que se le reconecte el servicio. Donde se requiera la excavación de la calle, es posible que esto demore 7 días.

**Service Location (Address of Property)**

Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (\_\_\_\_\_) \_\_\_\_\_

Gloria Lilly  
5214 Burtown St.  
Phila. Pa. 19124



PUC  
P.O. Box 3245  
Harrisburg Pa. 17105

