



UGI Utilities, Inc.
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Daniel V. Adamo
Vice President – Customer Relations

October 1, 2026

VIA ELECTRONIC FILING

Mr. Matthew L. Homsher, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street, 2nd Floor North
Harrisburg, PA 17105-3265

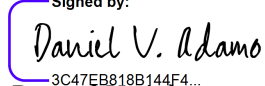
**Re: Root Cause Analysis Report – UGI Utilities, Inc. – Gas Division
Docket No. R-2024-3052716**

Dear Secretary Homsher:

Pursuant to the Commission Order entered September 11, 2025 at Docket No. R-2024-3052716, UGI Utilities, Inc. – Gas Division ("UGI Gas") submits its root cause analysis report. This filing complies with the reporting requirement established in Paragraph 86 of the Joint Petition for Settlement in the above-referenced docket, and presents UGI Gas's progress and the results of its review and implementation of the Root Cause Analysis and/or Apparent Cause Evaluation process.

Copies of this filing have been provided per the attached Certificate of Service. Should you have any questions related to this filing, please contact Tracey Ciesnolevicz, Regulatory Governance and Performance, via e-mail at tciesnolevicz@ugi.com.

Respectfully yours,

Signed by:

3C47EB818B144F4...
Daniel V. Adamo

Enclosures: Root Cause Analysis Report
CC: Certificate of Service

CERTIFICATE OF SERVICE

UGI Utilities, Inc. – Gas Division

I hereby certify that a true and correct copy of the foregoing has been served upon the following persons, in the manner indicated, in accordance with the requirements of 52 Pa. Code § 1.54 (relating to service by a participant).

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Date: October 1, 2026

Signed by:

Daniel V. Adamo

3C47EB818B144F4
Daniel V. Adamo



UGI Utilities, Inc.

Report on Implementation of the Root Cause Analysis / Apparent Cause Evaluation Process

September 30, 2026

I. BACKGROUND

Paragraph 86 of the Joint Petition for Settlement (“Settlement”) approved in UGI Utilities, Inc. – Gas Division’s (“UGI Gas” or “Company”) 2025 Gas Base Rate Case, Docket No. R-2024-3052716, et al., provides:

UGI Gas will document and implement a formalized process using Root Cause Analyses (“RCA”) or Apparent Cause Evaluations (“ACE”), as circumstances warrant, to categorize, track, review and remediate Justified Complaints and Verified Infractions issued by the Commission’s Bureau of Consumer Services. ACEs are limited investigations of medium-low risk events, where the causal factor(s) is known, obvious or readily identifiable. Once the process is formalized and implemented, the Company will conduct a monthly review of Justified Complaints and Verified Infractions and the resulting RCAs’ and ACEs’ causal factors and corrective actions. The Company will provide a report to CAUSE-PA, CEO, I&E, the OCA, and the OSBA annually, describing its progress and the results of its review and implementation of the RCA and/or ACE process, with the first report being provided on or before October 1, 2026, until a final Commission order is entered in the Company’s next base rate proceeding.

This *Implementation of the Root Cause Analysis / Apparent Cause Evaluation Process Report* (“Report”) was developed pursuant to Paragraph 86 of the Settlement and describes the Company’s progress toward, and implementation of, a formalized RCA/ACE process.

II. SCOPE AND DEFINITIONS

The Company uses the same Customer Service personnel and processes to address Justified Complaints and Verified Infractions for both the Gas and Electric divisions. Accordingly, the Company developed and applied its RCA and ACE processes to both divisions. This method aligns with how complaints are actually received, investigated, and remediated in practice.

The RCA and ACE processes apply to Justified Complaints, which the Company defines as any instance in which the Company’s investigation identifies an action or omission that did not comply with applicable PUC regulations. This includes instances where the noncompliance is unrelated to the facts and issues raised or to any Verified Infraction ultimately issued by the Bureau of Consumer Services. As a result, the population of



Justified Complaints reviewed each month is necessarily broader than — and should not be equated with — the population of Verified Infractions.

It also should be noted that Verified Infractions represent a small fraction of the Company's overall PUC Complaint volume. In fiscal year 2026, the Bureau of Consumer Services assigned a violation to only 1% of completed or submitted PUC Complaints, consistent with the 1-2% rate observed in each of the preceding two fiscal years (Ex. 2.3).

III. DATA READINESS ASSESSMENT

Before conducting its first Apparent Cause Evaluation, the Company performed a data inventory and data quality assessment of the systems and reports used to categorize, track, and review Justified Complaints and Verified Infractions. That assessment, summarized in the Readiness Assessment (Ex. 1), found record and reporting deficiencies regarding (1) interaction-level notes, (2) employee and department attribution, and (3) closed-loop documentation of remediation steps. Based on these findings, the Company implemented a series of near-term data and reporting enhancements, including:

- Revised Justified Reason and Sub-Reason categories to adequately capture the range of possible causes;
- A cleansed master report with corrected and consistent employee and department data to facilitate comprehensive reviews;
- Updated user status codes;
- A centralized process for documenting coaching and corrective actions;
- A dashboard summarizing complaint and violation data for management review;
- A shared departmental mailbox to centralize investigation correspondence.

The Company has concluded that these enhancements, together with the process described in Section IV below, are sufficient to support the monthly process review contemplated by Paragraph 86 of the Settlement, while a full case management system remains under consideration as a longer-term solution to further improve data accessibility, quality, and case management.

IV. FORMALIZED ACE / RCA PROCESS

Consistent with Paragraph 86 of the Settlement, the Company has formalized a process to categorize, track, review, and remediate Justified Complaints and Verified Infractions using ACEs and, where warranted, full RCAs.



A. Monthly Review

The Company's Customer Relations Regulatory Governance and Performance Department conducts a monthly review of Justified Complaints and Verified Infractions to identify incidents warranting an ACE or RCA.

B. Apparent Cause Evaluations

For incidents that are medium-to-low risk and where the causal factor(s) are known, obvious, or readily identifiable, the Company conducts an ACE using a standardized investigation template. Each completed ACE documents the following:

- Incident information, including the complaint or infraction type, transaction ID(s), BCS decision, and department involved;
- A factual description of the incident and any immediate actions taken;
- The apparent cause and contributing factors, supported by evidence such as review of BCS complaint information, interaction record review, and audit of related violations or complaints;
- Corrective actions, including the responsible party, target date, and status; and
- An escalation determination, evaluating whether the incident instead warrants a full RCA.

Each ACE is supported by an investigation log documenting the investigative steps taken to identify the apparent cause, including department interviews, data audits, and hypothesis testing. The ACE is reviewed and signed off by the responsible analyst and supervisor or manager. Sample investigation logs are provided as Exhibits 2.1 and 3.1.

C. Escalation to a Full Root Cause Analysis

If an incident does not meet the criteria for an ACE — for example, because the cause is not readily identifiable, the issue is recurring or systemic, or it carries significant regulatory or compliance implications — the Company will instead conduct a full Root Cause Analysis. Escalation is evaluated against the following criteria:

- Recurring incident / repeat failure;
- Regulatory or compliance implications; and
- Cause is unclear or systemic factors are suspected.

D. Monthly Ongoing Monitoring

The Company's Customer Relations Regulatory Governance and Performance Department monitors the status of open corrective actions, and determines whether previously completed evaluations should be revisited in light of new data.



V. APPARENT CAUSE EVALUATIONS CONDUCTED DURING THIS REPORTING PERIOD

For this reporting period, the Company conducted two ACEs, copies of which, along with their supporting investigation logs and other exhibits, are included. These two areas were selected given the volume of incidents relative to other Justified Complaint and Violation categories (Ex. 2.3 and Ex. 3.2) and because the Company believes the resulting corrective actions will reduce the incidence rate moving forward.

A. ACE – Violations of 52 Pa. Code § 56.163(1)

In October 2025, the Company received eight infractions for late or incomplete reports submitted to the BCS, representing 17% of all violations received during the period 10/1/2025-7/31/2026 (Ex. 2.3). The Company's investigation identified the apparent cause as a temporary increase in complaint volume that overburdened the three-person Compliance team responsible for processing complaint reports that month, with human error contributing to the reports that included missing information.

Corrective actions include a completed action plan providing Call Center staff support to Compliance during peak-volume months, an in-process audit and coaching review addressing human performance issues, and an IT request — targeted for Q2 FY2027 — to build a case management dashboard giving Compliance management real-time visibility into case load and employee assignment.

B. ACE – Denial of Service, No Denial Letter Sent

The Company investigated a Justified Complaint in which a customer was quoted an incorrect restoration balance and a corrected denial of service letter reflecting the accurate amount was not provided, resulting in a violation of 52 Pa. Code § 56.35. The apparent cause was identified as human error — representatives did not fully investigate the account history or follow the correct procedure for issuing a corrected denial letter.

Corrective actions included completed one-on-one coaching for the representatives involved and an in-process effort to identify representatives who would benefit from refresher training. Because available data was insufficient at this time to fully test certain hypotheses (including whether co-responsible-party scenarios contribute to missed denial letters), the Company will continue to monitor the Justified Complaint rate for this sub-reason and will revisit this ACE, including consideration of escalation to a full Root Cause Analysis, if the rate does not improve.

VI. ONGOING MONTHLY REVIEW AND NEXT STEPS

The Company will continue its monthly review of Justified Complaints and Verified Infractions and the resulting ACE and RCA causal factors and corrective actions. The Company also will provide its subsequent annual report describing the progress and



results of this process on or before October 1st of each year, until a final Commission order is entered in the Company's next gas base rate proceeding.

VII. EXHIBITS

- Exhibit 1 – Root Cause/Apparent Cause Analysis Readiness Assessment;
- Exhibit 2 – ACE – Violations of 52 Pa. Code § 56.163(1)
 - Exhibit 2.1 – Investigation Log;
 - Exhibit 2.2 – Complaint List with Violation, October 2025;
 - Exhibit 2.3 – Violations Summary;
- Exhibit 3 – ACE - Denial of Service – No Denial Letter Sent
 - Exhibit 3.1 – Investigation Log;
 - Exhibit 3.2 – Justified Complaint by Reason, No Denial Letter Sent

Exhibit 1 – Root Cause/Apparent Cause Analysis Readiness Assessment

ROOT CAUSE/APPARENT CAUSE ANALYSIS READINESS ASSESSMENT

Joint Petition for of Settlement of Docket No. R-2024-3052716, Paragraph 86:

UGI Gas will document and implement a formalized process using Root Cause Analyses (“RCA”) or Apparent Cause Evaluations (“ACE”), as circumstances warrant, to categorize, track, review and remediate Justified Complaints and Verified Infractions issued by the Commission’s Bureau of Consumer Services. ACEs are limited investigations of medium-low risk events, where the causal factor(s) is known, obvious or readily identifiable. Once the process is formalized and implemented, the Company will conduct a monthly review of Justified Complaints and Verified Infractions and the resulting RCAs’ and ACEs’ causal factors and corrective actions. UGI Gas will provide a report to CAUSE-PA, CEO, I&E, the OCA, and the OSBA annually, describing its progress and the results of its review and implementation of the RCA and/or ACE process, with the first report being provided on or before October 1, 2026, until a final Commission order is entered in UGI Gas’s next base rate proceeding.

Assessment Overview: Upon a final order in the aforementioned proceeding, UGI Gas conducted an initial data assessment to determine whether Apparent Cause or Root Cause analyses could be conducted using information that was readily available. Findings of this assessment were that system and business process enhancements were required to conduct such analyses. The following describes this assessment and findings in more detail and is provided as a supporting document for the Apparent Cause Evaluations that were conducted.

A. Data Inventory Assessment**a. Actions Taken**

- i. Evaluation of available data related to BCS complaints
- ii. Evaluation of existing report to query and present the data
- iii. Interviews with Customer Relations Regulatory Compliance Department
- iv. Business process mapping of internal process for BCS Complaints
- v. Review of previously considered IT enhancements

b. Key Findings

- i. Available data is high level; detailed data is difficult to mine and track
 1. Only high-level data is available without ability to directly drill down to interaction record notes where the details of findings from Customer Relations Regulatory Compliance Department are logged.
 2. Internal system of record is not integrated with BCS Complaint Processing System, which provides details of findings from BCS Investigator.
 3. Closed-loop process for steps taken by Call Center or Training Department to remediate cause of Justified Complaint is informal

Exhibit 1 – Root Cause/Apparent Cause Analysis Readiness Assessment

4. Internal system of record does not allow for tracking of complaint handling actions across multiple departments, thus most investigation correspondence handled through informal, individual email correspondence.
- ii. Existing report and underlying system of record form fields need enhancements
 1. Required information to effectively categorize and track is not present in current system of record
 2. Existing report contains fields that are null or superfluous or redundant
 3. Some report column headings do not match the data stored in the field
 4. Report does not provide Customer Relations Regulatory Compliance Department management with ability to view case load, employee complaint assignment, complaint processing time, etc., thus limiting management's ability to take real-time corrective actions
 5. Inability to conduct reporting on Disputes and Complaints concurrently

B. Data Quality Assessment

a. Actions Taken

- i. Full review of all existing data (including existing report and BCS Complaint Processing system)
- ii. Initial analysis of data usefulness
- iii. Interviews with Customer Relations Regulatory Compliance Department
- iv. Findings presentation made to multiple departments
 1. Brainstorming and prioritizing remediation steps

b. Key Findings

- i. Justified reason codes were insufficient, with most being coded as "Other"
- ii. User status codes are insufficient to oversee process status of complaint
- iii. Employee names associated with Justified Complaints were inconsistently formatted
- iv. Assignment of department based on employee inconsistent/incorrect
- v. Data format requires manual manipulation to effectively review at each Justified Reason, Department, Employee and Violation

C. Data and Reporting Enhancements

- a. Coded "Other" categories for Justified Reason
 - i. Determined revised Justified Reason and Sub reason to adequately capture possibilities

Exhibit 1 – Root Cause/Apparent Cause Analysis Readiness Assessment

- ii. Created IT enhancement to adjust form fields to include revised reasons and sub reasons
- b. Created master reporting spreadsheet
 - i. Cleansed Justified employee name and department data to be correct and consistent
 - ii. Recoded Justified Reasons to match new list, add Sub reason
 - iii. Transformed creation date formats
 - iv. Transformed data into reportable format
 - v. Appended coaching actions
- c. Added more descriptive user status codes to support detailed analysis.
- d. Implemented process for centralized, formal documentation of coaching actions
- e. Created dashboard to summarize and share data insights
 - i. Regularly report findings to Customer Relations Regulatory Compliance and Customer Call Center Departments to identify the need to conduct an ACE.
- f. Created Shared Microsoft Mailbox Customer Relations Regulatory Compliance Department
 - i. Visibility of correspondence across departments
 - ii. Documentation of steps taken until case management system can be built

Conclusion: A full case management system is still recommended for future state to overcome data accessibility, quality and case management gaps, while also reducing the manual efforts to transform and analyze the data. However, improvements made to current state are effective to conduct a monthly review of Justified Complaints and Verified Infractions and the resulting RCAs' and ACEs' causal factors and corrective actions.

Exhibit 2 – ACE – Violations of 52 Pa. Code § 56.163(1)

Docusign Envelope ID: 75736B04-0449-8A74-81CA-A847597ACCD0

APPARENT CAUSE EVALUATION | Customer Complaint Investigation Report

APPARENT CAUSE EVALUATION (ACE)
Customer Complaint Investigation Report

INCIDENT INFORMATION			
Complaint Created Date:	October 8 – October 10, 2025	Date of Incident:	October 18 – November 6, 2025
Complaint Transaction ID:	See below	Complaint Type:	Informal
Complaint Reason:	Other	Complaint Sub-reason:	
BCS Decision:	Dismissal	Department Involved:	Compliance
Prepared By:		Report Date:	8/11/2026
INCIDENT DESCRIPTION			
What happened? Describe the incident clearly and factually (who, what, when, where, how): In the month of October 2025, UGI received 8 BCS violations for violating PA PUC 52 Pa. Code § 56.163(1) with BCS Investigators citing "The report submitted to the Bureau of Consumer Services was not provided in a timely manner or did not include all relevant material required by staff." This represents 17% of all violations received by UGI between 10/1/2025 and 7/31/2026 (Ex. 2.3). Seven of the eight violations were due to a late delivery to BCS and one was missing information relevant to the complaint (Ex. 2.2). Transaction IDs 7000036496, 7000036531, 7000036532, 7000036539, 7000036541, 7000036546, 7000036548, 7000036544			
IMMEDIATE ACTIONS TAKEN			
List all immediate response actions taken: - Employees worked overtime to complete and submit the reports the following day (Saturday) - Supervisor coaching for the employee error			
APPARENT CAUSE IDENTIFICATION			
Category of Cause:	Other		
Direct / Immediate Cause:	A substantial increase in the number of complaints overburdened the Compliance department team that processes complaint reports.		
Contributing Factor(s):	- Insufficient staffing during a peak complaint month - Limited visibility for Compliance department management to distribute and manage case load per employee - No alerts to notify staff that reports would be late - Human error on report with missing information		

Exhibit 2 – ACE – Violations of 52 Pa. Code § 56.163(1)

Docusign Envelope ID: 75736B04-0449-8A74-81CA-A847597ACCD0

APPARENT CAUSE EVALUATION | Customer Complaint Investigation Report

Evidence / Basis for Cause:	- Review of BCS complaint information - Investigation of interaction records on account - Audit of Compliance department violations
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CORRECTIVE ACTIONS			
Action Description	Responsible Person	Date	Status
Cross-trained other employees in Compliance department to assist during months with peak complaint volumes	Compliance Department	7/23/2026	Completed
Created action plan with Call Center staff to provide employee resources to support Compliance department during peak month of October	Call Center Mgmt	7/16/2026	Completed
Review audit with Compliance department and discuss action plan for human performance issues associated with violations for 56.163(1)	Sr. Mgr	8/21/2026	Completed
Create a case management dashboard that gives Compliance management visibility into case load and employee assignment	IT Department	Q2 FY2027	Not started
ESCALATION DETERMINATION			
Does this incident require escalation to a full Root Cause Analysis (RCA)? ☒ No — Apparent cause is clear and corrective actions are sufficient. ☐ Yes — Escalate to RCA (check all that apply): ☐ Recurring incident / repeat failure ☐ Regulatory or compliance implications ☐ Cause is unclear or systemic factors suspected Rationale / Notes: Corrective actions are sufficient to reduce the incidence of Violations for 56.163(1)			

SIGN-OFF			
Role	Name & Signature	Date	
Analyst / Preparer			
Supervisor / Manager			

- INSTRUCTIONS FOR USE
- Complete all sections as thoroughly as possible and attach any supporting documents.
 - The Apparent Cause is the most visible or obvious cause — not necessarily the deepest systemic cause.
 - If systemic issues are suspected, or if the incident recurs, escalate to a full Root Cause Analysis (RCA).
 - Retain completed forms per your organization's records retention policy.

Exhibit 2.1 - Investigation Log

Apparent Cause Evaluation — Investigation Log

Complaint Transaction ID:	7000036496, 7000036531, 7000036532, 7000036539, 7000036541, 7000036546, 7000036548, 7000036544
Date of Incidents:	October 18 - November 6, 2025
Complaint Type:	Informal
Complaint Reason:	Restoration, Denial of Service, Billing/Payment
Complaint Sub Reason:	
BCS Decision:	Violation 56.163(1)
Prepared By:	██████

Incident Description	In the month of October 2025, UGI Gas ("the Company") received 8 BCS violations for violating PA PUC 52 Pa. Code § 56.163(1) with BCS Investigators citing THE REPORT SUBMITTED TO THE BUREAU OF CONSUMER SERVICES WAS NOT PROVIDED IN A TIMELY MANNER OR DID NOT INCLUDE ALL RELEVANT MATERIAL REQUIRED BY STAFF. This represents 17% of all violations received by the Company fiscal year-to-date (10/1/2025-7/31/2026) (Ex. 2.3). Seven of the eight violations were due to a late delivery to BCS and one was missing information relevant to the complaint (Ex. 2.2). In October 2025, the Compliance team that handles PUC complaints, consisting of three employees, processed 672 complaints, which is much higher than the average monthly complaint case load (Ex. 2.3).
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#	Action Taken	Date	Result / Finding	Post Action Taken
1	Compliance Team Interview	6/4/2026	Violations for 56.163(1) include late reports and incorrect/incomplete reports. The primary cause given for late and incomplete/incorrect reports was insufficient employee resources. Other causes included human error, system failure or ongoing backlogs from previous months.	Conduct analysis to support or deny claim that insufficient employee resources is the primary cause of incident.
2	Violations audit 56.163(1)	June-July 2026	Availability of violation data is limited. Compliance team needed to manually pull each violation to adequately identify the reason for each 56.163(1) violation. Additionally, an analysis of case load by employee by month was attempted to support or deny insufficient employee resources hypothesis. There is no case management tracking system in place and the data currently available does not support or deny the theory. During the audit, some human performance issues were identified.	Submitted IT request to develop a dashboard that provides visibility in complaint volume and employee assignment. Estimated implementation is Q2 2027. Additionally, insights on human performance issues have been shared with management and an action plan was implemented to reduce human error in future.
3	Call Center Team Brainstorming	7/16/2026	Call center staff can provide employee support to Compliance during peak months with adequate notice.	Analyst to monitor complaint volume daily mid-September until Dashboard can be implemented.

Exhibit 2.2 - Complaint List with Violation, October 2025

User Status	Complaint Reason	Transaction ID	Regulation	Created Date	Due Date	Submitted to BCS	Violation Explanation
Completed	Billing/Payment	7000036496	56.163(1)	10/8/2025	11/6/2025	11/6/2025	Not addressing reason for incorrect address
Completed	Denial of Service	7000036531	56.163(1)	10/10/2025	10/17/2025	10/18/2025	
Completed	Restoration	7000036532	56.163(1)	10/10/2025	10/17/2025	10/18/2025	Late
Completed	Denial of Service	7000036539	56.163(1)	10/10/2025	10/17/2025	10/20/2025	Late
Completed	Denial of Service	7000036541	56.163(1)	10/10/2025	10/17/2025	10/18/2025	Late
Completed	Restoration	7000036544	56.163(1)	10/10/2025	10/17/2025	10/20/2025	Late
Completed	Restoration	7000036546	56.163(1)	10/10/2025	10/17/2025	10/18/2025	Late
Completed	Restoration	7000036548	56.163(1)	10/10/2025	10/17/2025	10/18/2025	Late

Exhibit 2.3 - Violations Summary

Complaint Counts by Type and Status

FY TRENDS				
Category	FY24	FY25	FYTD26	Total
☐ Informal	5,314	4,852	3,722	13,888
COMP	5,245	4,796	3,514	13,555
CANC	69	55	58	182
SUBM		1	91	92
OPEN			52	52
PROC			7	7
☐ CAP Informal	226	209	215	650
COMP	226	208	186	620
SUBM			18	18
OPEN			9	9
CANC		1	1	2
PROC			1	1
☐ Formal	70	80	72	222
COMP	69	79	39	187
SUBM	1	1	31	33
OPEN			2	2
☐ CAP Formal	2	4	1	7
COMP	2	4	1	7
Total	5,612	5,145	4,010	14,767

FYTD25	
☐ Informal	3,818
COMP	3,771
CANC	46
SUBM	1
☐ CAP Informal	133
COMP	132
CANC	1
☐ Formal	66
COMP	65
SUBM	1
☐ CAP Formal	2
COMP	2
Total	4,019

FYTD26	
☐ Informal	3,722
COMP	3,514
SUBM	91
CANC	58
OPEN	52
PROC	7
☐ CAP Informal	215
COMP	186
SUBM	18
OPEN	9
CANC	1
PROC	1
☐ Formal	72
COMP	39
SUBM	31
OPEN	2
☐ CAP Formal	1
COMP	1
Total	4,010

Exhibit 2.3 - Violations Summary

Complaint Counts by BCS Decision*

Complaints BCS Dismissal						
FY	FY24		FY25		FYTD26*	
Dismissed	Count	%	Count	%	Count	%
No	2,354	42%	1,867	37%	1,245	32%
Yes	3,189	58%	3,222	63%	2,635	68%
Total	5,543	100%	5,089	100%	3,880	100%

FYTD25		
Dismissed	Count	%
No	1,442	36%
Yes	2,530	64%
Total	3,972	100%

FYTD 26		
Dismissed	Count	%
No	1,245	32%
Yes	2,635	68%
Total	3,880	100%

Complaints BCS Violation						
FY	FY24		FY25		FYTD26*	
Violation	Count	%	Count	%	Count	%
Yes	102	2%	86	2%	46	1%
No	5,441	98%	5,003	98%	3,834	99%
Total	5,543	100%	5,089	100%	3,880	100%

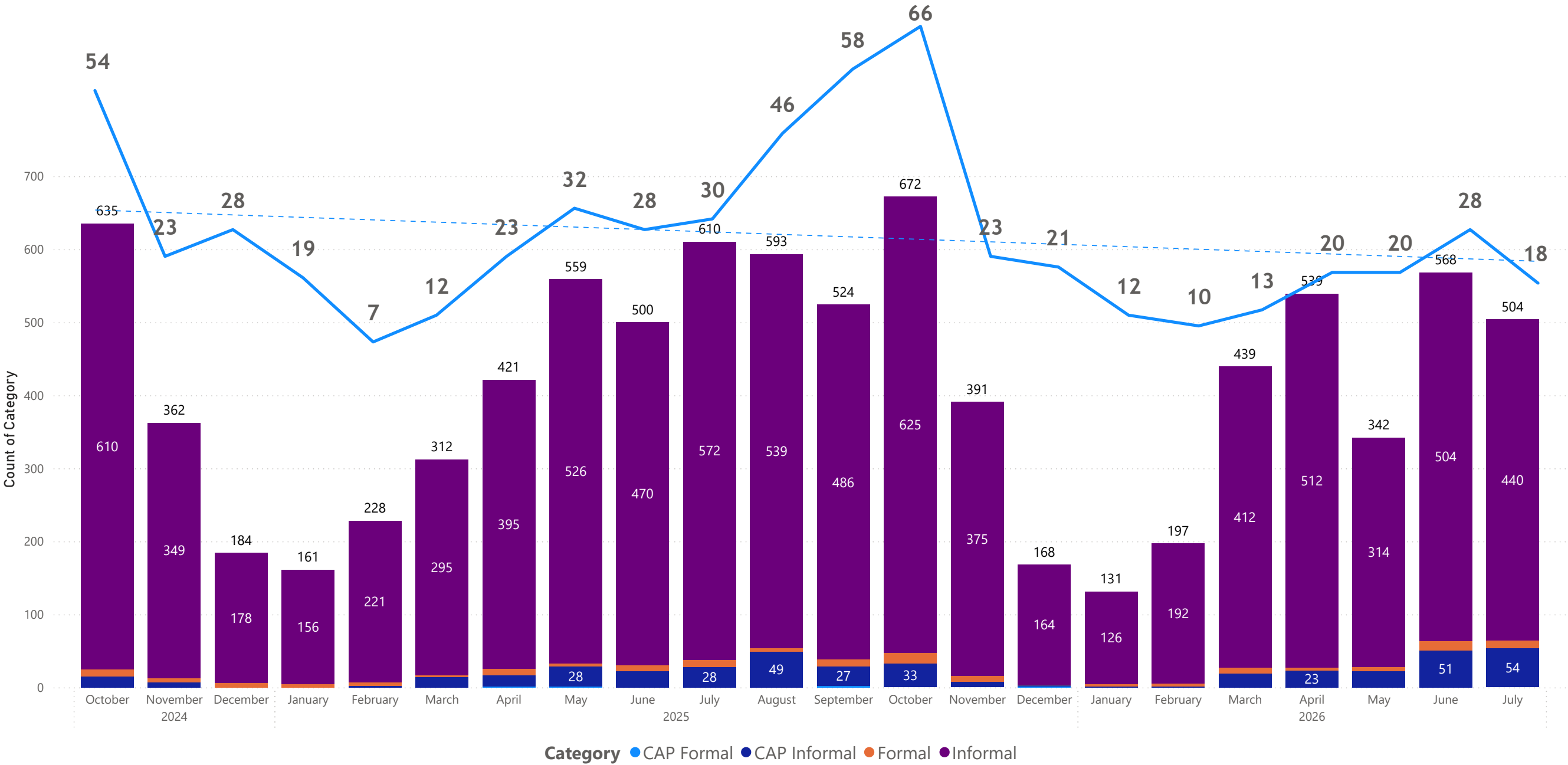
FYTD25		
Violation	Count	%
Yes	71	2%
No	3,901	98%
Total	3,972	100%

FYTD26		
Violation	Count	%
Yes	46	1%
No	3,834	99%
Total	3,880	100%

*Completed or Submitted only;
Updated through July 31, 2026

Exhibit 2.3 - Violations Summary

Complaint & Justified Complaints Trend



*Excludes Canceled Complaints; Blue solid line indicates the number of justified complaints per month with the dotted blue line indicating the linear trend

Exhibit 2.3 - Violations Summary

Violations Monthly Trend - Regulations

Year	2025			2026						Total
Regulation	October	November	December	January	February	March	April	May	June	
56.163(1)	8		2				3	2		15
56.191(C)(2)(IV)	4	1					1			6
56.1	1					1	1	2		5
56.36(B)(1)		2	1					1	1	5
56.191(C)(2)(III)				1					1	2
56.81	2									2
56.12(6)						1				1
56.141(2)	1									1
56.151(2)					1					1
56.151(5)							1			1
56.16(A)					1					1
56.163(3)						1				1
56.191(B)(2)(V)	1									1
56.2			1							1
56.36(B)(2)			1							1
56.53(C)			1							1
59.21(F)(3)							1			1
Total	17	3	6	1	2	3	7	5	2	46

*Updated through July 31, 2026

Exhibit 3 – ACE - Denial of Service – No Denial Letter Sent

Docusign Envelope ID: C49F29E3-908E-86EB-8008-67DDC9D46E3C

APPARENT CAUSE EVALUATION | Customer Complaint Investigation Report

APPARENT CAUSE EVALUATION (ACE)
Customer Complaint Investigation Report

INCIDENT INFORMATION			
Complaint Created Date:	12/15/2025	Date of Incident:	12/12/2025
Complaint Transaction ID:	7000037505	Complaint Type:	Informal
Complaint Reason:	Denial of Service	Complaint Sub-reason:	No denial letter sent
BCS Decision:	Violation	Department Involved:	Call Center
Prepared By:		Report Date:	8/11/2026
INCIDENT DESCRIPTION			
What happened? Describe the incident clearly and factually (who, what, when, where, how): Customer had called multiple times, beginning on 12/8, to restart service at the current property where the customer was quoted an incorrect balance by two representatives on two separate calls. Customer then called on 12/12 and was advised that to restart service, he needed to pay the unpaid balance on the current property as well as a theft balance from a previous residence. BCS found that the amount requested and printed on the denial letter that was sent on 12/8 was incorrect. The rep provided the correct amount to restore on 12/12 but failed to send a corrected denial letter. The company received a violation for improper denial (52 Pa. Code § 56.35).			
IMMEDIATE ACTIONS TAKEN			
List all immediate response actions taken: 1. Employees coached by supervisor			
APPARENT CAUSE IDENTIFICATION			
Category of Cause:	Human error/Behavior		
Direct / Immediate Cause:	Reps that quoted wrong balance did not adequately investigate previous account to calculate correct restoration amount. The rep who failed to send a denial letter did not follow the correct procedure for issuing a letter with the corrected balance.		
Contributing Factor(s):	• Reps not taking the time to fully investigate account • System functionality to supply the number of broken payment arrangements to the rep requires enhancements • Reps trusting that prior reps handled correctly (not conducting full investigation or calculating the amount independently) • Reps did not use the recommended platform, which automatically sends the denial of service letter.		

Exhibit 3.1 - Investigation Log

Apparent Cause Evaluation — Investigation Log

Complaint Transaction ID:	7000037505
Date of Incident:	12/12/2025
Complaint Type:	Informal
Complaint Reason:	Denial of Service
Complaint Sub Reason:	No denial letter sent
BCS Decision:	Violation
Prepared By:	██████

Incident Description	Customer had called multiple times, beginning on 12/8 to restart service at current property where the customer was misquoted the correct balance by two representatives. Customer then called on 12/12 and was advised that to start service, he needed to pay unpaid balance on current property as well as theft balance from previous residence. BCS found that the amount requested and printed on the denial letter that was sent on 12/8 was incorrect. The rep provided the correct amount to restore on 12/12 but failed to send a corrected denial letter. The company received a violation for improper denial (52 Pa. Code § 56.35).
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#	Action Taken	Date	Result / Finding	Post Action Taken
1	Call Center Mgmt/QA & Training hypothesis ideation	2/20/2026	Hypothesis offered that agents are not using the correct system (which automatically generates a denial letter) and forgetting to send one manually.	Pulled suggested report that would indicate which system was used to verify if hypothesis is true. Insufficient data exists to support or reject the hypothesis. This data only exists where a credit check was done by the rep.
2	Call Center Mgmt/QA & Training regroup with hypothesis results and further discussion	4/9/2026	Hypothesis offered that Act 201, specifically when a co-responsible person is designated as the new account owner, may cause reps to incorrectly miss conducting a credit check, thus failing to send a denial letter if needed.	There is no documentation to test this hypothesis. A request was made to call center supervisors to indicate on the error coaching log whether the issue stemmed from Act 201 along with providing results from conversation with employee if causes other than human error were identified.
3	Supervisor assessment of interaction	5/19/2026	No additional contributing causes were identified.	NA
4	Call Center Mgmt/QA & Training regroup with hypothesis results and further discussion	7/16/2026	No additional contributing causes were identified. The following actions were proposed to reduce missed denial letters: (1) Deeper qualitative interviews with representatives to find the underlying reasons denial letters are missed. (2) Targeted monitoring and retraining of employees tied to a justified "No Denial Letter Sent" complaint. (3) A standard policy to always send a denial letter, so reps don't assume a previous rep already sent one.	(1) and (2) are in process. (3) was determined to not be a viable solution.

Exhibit 3.2 – Justified Complaint by Reason, No Denial Letter Sent

Justified Complaint Attribution

Justified Complaint by Reason				
FY	FY25		FYTD26*	
Justified Reason	Count	%	Count	%
⬆ Denial Of Service	95	19%	83	25%
Incorrect Denial	32	6%	37	11%
No Denial Letter Sent	63	12%	46	14%
+ Incorrect Amount/Terms Quoted	271	53%	163	49%
+ Incorrect Deposit Amount	6	1%		
+ Info Entered Incorrect/Incomplete	100	19%	61	18%
+ Med Cert Eligibility	1	0%	3	1%
+ METER CHANGE NOT ENTERED			1	0%
+ Meter Read Error	2	0%	2	1%
+ Other	9	2%	3	1%
+ Restoration Error	2	0%	4	1%
+ Shut Off In Error	23	4%	12	4%
+ Universal Service Program	4	1%	4	1%
Total	513	100%	336	100%

Justified Complaint by Reason Oct 2024-Jul 2025		
Justified Reason	Count	%
⬆ Denial Of Service	71	20%
Incorrect Denial	24	7%
No Denial Letter Sent	47	13%
+ Incorrect Amount/Terms Quoted	168	47%
+ Incorrect Deposit Amount	5	1%
+ Info Entered Incorrect/Incomplete	82	23%
+ Med Cert Eligibility	1	0%
+ Meter Read Error	2	1%
+ Other	6	2%
+ Shut Off In Error	17	5%
+ Universal Service Program	4	1%
Total	356	100%

Justified Complaint by Reason Oct 2025-Jul 2026		
Justified Reason	Count	%
⬆ Denial Of Service	83	25%
Incorrect Denial	37	11%
No Denial Letter Sent	46	14%
+ Incorrect Amount/Terms Quoted	163	49%
+ Info Entered Incorrect/Incomplete	61	18%
+ Med Cert Eligibility	3	1%
+ METER CHANGE NOT ENTERED	1	0%
+ Meter Read Error	2	1%
+ Other	3	1%
+ Restoration Error	4	1%
+ Shut Off In Error	12	4%
+ Universal Service Program	4	1%
Total	336	100%

*Updated through July 31, 2026