

Utility Complaint Form

Name:		
Address (Street):		
City:	State:	Zip code:
Please Circle the Type of Property: Resident	tial Business	
Utility Company Name:		
Account Number:		
Primary Telephone Number:		480
Secondary Telephone Number:		
Email:		
Best way to contact you? Primary phone	Secondary phone	eEmail
Case Reason:		
o Service Issue (Includes both disruptions	(outages) and quality or	service)
o Billing Issue		
o Other		
When did your issues first begin?		
Please include a brief description of the issues	you are having (use the	reverse of this page if needed):
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