

## HEFPA Guide and Forms

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The primary mission of the New York State Department of Public Service is to ensure safe, secure, and reliable access to electric, gas, steam, telecommunications, and water services for New York State's residential and business consumers at just and reasonable rates.

### **HEFPA GUIDE and Forms**

This guide and the forms below can be used by utility providers (the Company) and utility consumers (the Customer) as an overview of the required information regarding New York State's residential customers rights and certain policies and procedures for utility service and billing.

### **HEFPA**

As a residential customer of regulated utility services, you have certain rights assured by New York's Home Energy Fair Practices Act (HEFPA). For full copy of Residential Consumer Protections, under HEFPA, visit the Department of Public Service's website at [www.dps.ny.gov](http://www.dps.ny.gov). Link: [Home Energy Fair Practices Act \(HEFPA\)](#)

### **ANNUAL NOTIFICATION OF RIGHTS**

Every utility shall, at the time service is initiated to a residential Customer and at least annually thereafter, by a notice accompanying a regular bill or in a separate mailing, provide residential Customers with a summary of their rights and obligations under the Home Energy Fair Practices Act (HEFPA) Which includes the rights and obligations of NYS Consumers and Public Utility Companies who provide residential utility services.

At a minimum, the Utility Company shall include the following:

- The rights and obligations of residential customers relating to application for services, customer billing, payment options, service termination, disconnection, and reconnection of service, and complaint procedures.
- A description of special protections afforded the persons who are elderly, blind, or disabled; have medical emergencies; or are receiving public assistance, supplemental security income benefits or additional State payments; and protection in cold weather periods.
- A request that residential customers who qualify for the protections referred to above voluntarily inform the utility.
- Appropriate forms that customers claiming the protections identified above may fill out and return.
- The right of a customer to designate a third party to receive copies of all notices relating to termination, disconnection, and suspension of service or other credit notices.
- A description of the customers' rights regarding demanding and holding of security deposits by the utility; and a description of the utility's budget or levelized payment plans and negotiating terms for deferred payment agreement plans.
- A description of the Utility Company's complaint handling procedures. Filed copy available from the Company and the Public Service Commission (PSC).

## **SERVICE APPLICATION**

The Company's service application includes Customer name, address, telephone number, any prior account information, and proof of identity. A written application maybe required, as well as a lease, deed, bill of sale or other documentation establishing the date of responsibility.

Every utility Company shall provide residential service to a Customer upon a verbal or written account application for service request, within five business days. Conditions apply:

- Unless otherwise specified by the Customer or precluded by public safety, or other physical impediments.
- If the Customer has an outstanding balance the Company may require the Customer make payment or enter into a residential deferred payment agreement plan to pay amounts due from a prior account, minus amount held in dispute.
- If the Company receives a guarantee of future payments to the extent authorized by the Social Services Law.
- The Commission or its authorized designee directs the provision of service.
- If the Customer's account will be seasonal or for short-term service, the Company may require a deposit amount.

## **Denial of Service**

The Company must contact and/or send a written notice of Denial of Service to the applicant within three business days of receipt of the Customer account application for service, which:

- Clearly states the reasons for the denial and specifies precisely what the applicant must do to qualify for service.

## **BILLING**

Residential utility Customers will receive utility bills monthly or as scheduled as provided in the Company's tariff. Bills are based on rates in the tariff set by the New York State Public Service Commission. Utility bills to a residential Customers shall provide, in clear and understandable form and language:

- The amount of service used, dates of the present and previous usage charge, the charges for service including any applicable fees or taxes, unit meter or flat rate charges and actual or estimated readings, where amounts are payable, and due date. Clearly stated are the penalty charge for bills paid late, credits from past bills, and any amounts owed and unpaid from pervious bills and any fees that may apply.
- Also included are the Customer's name, address and account number, the utility's Company contact information for questions or concerns about service or billing, hours of operation and emergency contact information, as well as the PSC's contact information on all the Company's customer facing materials. Customers may have the right to request bills, messages, and notices in Spanish or in large print.

## **COMPLAINT HANDLING**

The protocol for residents with questions, concerns, or complaints about their utility service or billing is as follows:

- First the Customer should contact the Company's customer service representative and submit the concern or complaint including the action or relief requested for resolution of the complaint.
- The Company shall investigate and respond to the complaint, verbally and/or in writing within 15 days of the receipt of the complaint.

- If the Customer believes the complaint has not been adequately addressed by the Company or at any time, they may contact the New York State Department of Public Service (DPS) at the Office of Consumer Services:
  - Website: [www.dps.ny.gov/complaints](http://www.dps.ny.gov/complaints)
  - Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
  - Mail: Office of Consumer Services, NYS Department of Public Service, 3 Empire State Plaza, Albany, NY 12223/90 Church Street, New York, New York 10007.

## **PAYMENT OPTIONS**

- **Budget Billing or Levelized Payment Plan**
  - Customers may request balanced/levelized billing for the payment of utility charges. The billing plan option is designed to reduce fluctuations in Customers' bills due to seasonal patterns of consumption. Balanced billing divides your utility costs into 12 equal monthly payments. The Company shall periodically review and adjust the balanced billing amount, as may be necessary. At the end of one year, the Customer shall be responsible to pay for any utility costs greater than the balanced billing amount paid, for overage the Customer account will be issued credit, or a refund can be requested.
  - The levelized plan is based on the Customer's recent 12-month billing or 12 months of billing data for the premises. If 12 months of billing data are not available for the premises, then the Company shall estimate consumption over the next 12-month period. Bills will clearly identify consumption and state the amounts that would be due without levelized or budget billing. In addition, each plan shall provide the bills will be subject to regular review for conformity with actual billings.
- **Quarterly Billing Plan**
  - Public Service Law, rather than HEFPA, allows a utility to offer residential Customers who are 62 years of age or older an alternative to monthly billing. A plan is created for payment on a quarterly basis of charges for service rendered provided that such Customer's average annual billing is not more than \$150.
- **A Deferred Payment Agreement (DPA)**

The residential deferred payment agreement plan is a written agreement for the payment of outstanding charges over a specific period, signed by both the Customer and Company.

  - A utility must make reasonable efforts to contact an eligible Customer to offer a deferred payment agreement for payment of a bill or arrears owed on an account.
  - Customers having difficulty paying the utility bill, should contact the Company to enroll in a DPA with the Company, and to make reasonable efforts to pay the utility bill. The negotiated terms will be tailored to the Customer's financial circumstances.

- To arrange the DPA the Company may take a financial statement and require proof of income. This information will be handled confidentially. A minimum payment agreement is \$0 down payment, and installment payments of \$10.00 per month.
- **Affordability Discount**
  - Customers may qualify for a rate reduction or an affordability discount plan, provided by the Company. Customers may be eligible to enroll, if receiving benefits under Supplemental Security Income, Temporary Assistance, Safety Net Assistance, Food Stamps, or have received a Home Energy Assistance Program grant in the preceding twelve months. Customers should contact the Company, to notify them of these qualifications.

### **SPECIAL PROTECTIONS**

Regardless of a Customer's payment history relating to the utility bills, the residential utility service will be continued if the Customer's health or safety is threatened, or if the Customer or a household member needs life support equipment.

- The Company will not disconnect or refuse to restore service, in situations where a **medical emergency** exists. The Company may request a medical certification notice from the Customer's medical provider, doctor, or local board of health.
- Customers may be referred to the Department of Social Services for special protections if household members are age eighteen (18) or younger or sixty-two (62) and older, elderly, blind, or disabled.
- **Cold Weather Period**  
The utility's service will be continued during the Cold Weather Period moratorium from November 1st of each year through April 15th of the following year.

### **THIRD PARTY NOTICE**

Customers interested in Voluntary Third-Party Notice, should notify the Company with the party's contact information and written agreement of the third party to receive copies of all utility Company Customers notifications relating to past due balances, disconnection of service or other service or credit actions.

- The Company shall promptly notify the residential Customer of the refusal or cancellation of such authorization by the third party.
- The Company shall confirm with the third party that the authorization to receive such notices does not constitute acceptance of any liability on the third party for service provided to the Customer.

### **TERMINATION OR DISCONNECTION OF SERVICE NOTICE**

The Company may disconnect utility service if the Customer did not pay for charges for services rendered, amounts due under a deferred payment agreement, or a lawfully required deposit. The Company is required to send a final disconnection notice no less than 15 days before the disconnection date. A final disconnection notice shall clearly state:

- The earliest date on which disconnection may occur.
- The reason for disconnection.

- The total amount required to be paid.
- How disconnection may be avoided.
- The address and phone number of the office of the Company that the Customer may contact about the account.
- The availability of procedures for handling complaints.
- A summary of protections available under HEFPA.
- In a size type capable of attracting immediate attention, a statement that reads, **“THIS IS A FINAL DISCONNECTION NOTICE. PLEASE REFER TO THIS NOTICE WHEN PAYING THIS BILL.”**

## **DEPOSITS**

The Company may require a deposit for accounts if:

- The Customer is a seasonal or a short-term customer.
- The Customer accumulates two consecutive months of arrears without making reasonable payment. The Company will provide the Customer written notice, at least 20 days before assessing a deposit.
- The Customer has had the utility service terminated, disconnected, or suspended for nonpayment to the Company during the preceding six months.
- The Company can permit the Customer to pay the deposit in installments over a period not to exceed 12 months.

Requirement:

- Deposit amounts will not be greater than twice the average monthly bill or exceed twice the estimated average monthly bill amount.
- Interest must be paid on deposits at a rate prescribed annually by the Commission.
- Interest will be applied to the bill when the deposit was held for a period of one year. If the customer is not delinquent in payment of bills during the one-year period, the deposit and the interest is refunded promptly.

Deposits for utility accounts shall not be required or held if:

- The Company knows the Customer to be a recipient of public assistance, supplemental security income, or additional State payments.
- The Company knows customer is 62 years of age or older unless such Customer has had service terminated, disconnected, or suspended by the Company for nonpayment of bills within the preceding six months.

## **Late Payment Charges**

The Company may impose a one-time or continuing late payment charge, not more than 1 1/2 percent per month, on the unpaid balance of any bill for service provided:

- when the bill clearly shows the amount billed,
- whether any charge will be imposed for late payment,
- when the late payment charge becomes applicable,
- and the time period during which the bill may be paid without the imposition of the late payment charge.

Residential customers on fixed incomes shall be offered the opportunity to pay their bills on a reasonable schedule that is adjusted for such customer’s periodic receipt of income without such customers incurring late payment charges provided:

- that the offer may prescribe a late payment charge where payment is not made within 20 days of the scheduled due date.

## **RECONNECTING SERVICE**

If the Customer's service has been shut off for non-payment, the Company must turn the utility service back on within 24 hours, where possible, in the following situations:

- The Customer has paid the amount due or signed a payment agreement and made the down payment, if required,
- The local Department of Social Services agrees to make a direct payment on the Customer's behalf or provides a written guarantee of payment,
- The Company is notified that serious harm to health or safety is likely to result if the utility service is not reconnected, or
- The Department or the Public Service Commission directs the Company to restore utility service.

## **FORMS**

**BUDGET BILL/LEVELIZED PAYMENT PLAN**

**PAST DUE REMINDER NOTICE**

**DEFERRED PAYMENT AGREEMENT (DPA) for Residential Utility Service**

**FINAL DISCONNECTION/TERMINATION NOTICE**

**CONFIDENTIAL ASSET EVALUATION FORM to assess Customer's ability to pay**

**NOTICE TO SOCIAL SERVICE of Customer's Inability to Pay**

**SPECIAL PROTECTIONS Registration Form**

**COMPLAINT HANDLING Residential Customer Complaint Form**



**BUDGET BILL/LEVELIZED PAYMENT PLAN**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Balanced billing divides your utility costs into 12 equal or levelized monthly payments. The Company shall periodically review and adjust the balanced billing amount, as may be necessary. At the end of one year, the Customer shall be responsible to pay for any utility costs greater than your balanced billing amount paid or the account will be issued credit, or a refund maybe requested.

**BUDGET BILLING/LEVELIZED PAYMENT PLAN**

**Customer requests enrollment of Budget Bill/Levelized Payment Plan. YES initial: \_\_\_\_\_**

**Monthly Installment Amount of \$ \_\_\_\_\_ the plan will commence for a 12-month period, beginning on the next bill Due Date: \_\_\_\_\_ and end on Date: \_\_\_\_\_**

**NOTE: Customers may request to STOP enrollment in the Budget Bill/Levelized Payment Plan at any time.**

**Acknowledgement/Acceptance of AGREEMENT with TERMS Above. YES initial: \_\_\_\_\_**

**Utility Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_**  
**Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

New York State residential utility Customers may contact the Department of Public Service at any time concerning the utility service. Office of Consumer Services

- Website: [www.dps.ny.gov/complaints](http://www.dps.ny.gov/complaints)
- Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
- Mail: Office of Consumer Services, NYS Department of Public Service, 3 Empire State Plaza, Albany, NY 12223/90 Church Street, New York, New York 10007

**PAST DUE REMINDER NOTICE**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**REMINDER NOTICE** Our records indicate that we have not received your payment. To Avoid action, make a payment of **PAST DUE AMOUNT \$**\_\_\_\_\_. Please immediately contact the Company:

- To make the payment or payment arrangements.
- If you question the amount owed.
- If you are unable to make payment because your financial circumstances have changed significantly due to events beyond your control.
- To avoid incurring further late payment charges.
- If you or anyone in your household meet any of the following conditions, medical emergency; elderly; blind or disabled.
- If you would like to enroll in a BUDGET BILLING/LEVELIZED PAYMENT PLAN.
- If you would like to enroll in a residential DEFERRED PAYMENT AGREEMENT (DPA).
- If you would like to negotiate a DPA to avoid Final Disconnection or Termination of service, you should immediately contact the Company.

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- Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
- Mail: Office of Consumer Services, NYS Department of Public Service, 3 Empire State Plaza, Albany, NY 12223/90 Church Street, New York, New York 10007



**DEFERRED PAYMENT AGREEMENT (DPA)**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Current Total Amount: \$ \_\_\_\_\_ Past Due Amount: \$ \_\_\_\_\_  
The Customer requests enrollment of affordable residential DPA. YES initial: \_\_\_\_\_

The utility is required to offer a payment agreement that the customer or applicant can pay, considering financial circumstances. A minimum DPA provides for installments as low as \$10.00 per month and no \$0. down payment. Entering into a payment agreement will avoid termination, disconnection, or suspension of service.

**DEFERRED PAYMENT AGREEMENT (DPA) Negotiated Plan Terms**

**Total Amount Due \$ \_\_\_\_\_ Required down payment \$ \_\_\_\_\_**

**Monthly Installment Amount \$ \_\_\_\_\_ the plan will commence beginning on the next bill Due Date: \_\_\_\_\_ and end on Date: \_\_\_\_\_**

**NOTE: The agreement should not be signed if the Customer or applicant is unable to pay its terms. If the Customer does not meet the terms of this DPA, the utility Company may take steps to terminate, disconnect or suspend the Customers utility service.**

**Acknowledgement/Acceptance of AGREEMENT with TERMS Above. YES initial: \_\_\_\_\_**

**Utility Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

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- Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
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**FINAL DISCONNECTION/TERMINATION NOTICE**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Our records indicate that we have not received your payment for the **PAST DUE AMOUNT** \$\_\_\_\_\_. If you question the amount owed, you should immediately contact the Company.

**“THIS IS A FINAL DISCONNECTION/TERMINATION NOTICE.  
PLEASE REFER TO THIS NOTICE WHEN PAYING THIS BILL.”**

The Company may discontinue your utility service in accordance with New York State law.  
TO AVOID LEGAL ACTION

**PLEASE REMIT A payment of \$\_\_\_\_\_ By Due DATE: \_\_\_\_\_**  
**Termination of service may occur any time after DATE: \_\_\_\_\_**

**Bring this NOTICE to the attention of the Company’s Customer Service Representative.**

Immediately contact the Company

- If you are unable to make payment because your financial circumstances have changed significantly due to events beyond your control.
- If you or anyone in your household meet any of the following conditions, medical emergency; elderly; blind or disabled.
- If you would like to enroll in a residential DEFERRED PAYMENT AGREEMENT (DPA) to avoid Final Disconnection or Termination of service.

New York State residential utility Customers may contact the Department of Public Service at any time concerning the utility service. Office of Consumer Services

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- Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
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**CONFIDENTIAL ASSET EVALUATION FORM**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

**APPLICANT INFORMATION**

Customer Name: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Mailing Address if different: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Customer Account Number: \_\_\_\_\_ Current Total Amount: \$ \_\_\_\_\_  
Past Due Amount: \$ \_\_\_\_\_ Service Period Date from-to: \_\_\_\_\_

Number of members in the household: \_\_\_\_\_ Full time dependents, high school or college student: \_\_\_\_\_ Does anyone get or recently applied for assistance or any of the following: HEAP, SNAP, Workers' Compensation, Unemployment, Social Security, Medicare, disability, Veterans benefits, Child support, Alimony/spousal support, Contribution from someone outside the household, rental income, room/board received, Income from savings, checking, CD, money market accounts, stocks, bonds, securities, IRA, annuity, 401K distributions, self-employment income, other? IF yes list and describe, provide CASE Number: \_\_\_\_\_

**INCOME-ASSETTS**

Employer(s) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Date Started: \_\_\_\_\_ Person to Contact: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Monthly Income Amount: \$ \_\_\_\_\_ Annual Income Amount: \$ \_\_\_\_\_

**EXPENSES-Monthly**

Rent or Mortgage payment Amount: \$ \_\_\_\_\_  
Utility Bills: electric, gas, phone, cable, internet, wood, propane, water: \$ \_\_\_\_\_  
Food: \$ \_\_\_\_\_  
Transportation: public transportation fares, car insurance, and maintenance: \$ \_\_\_\_\_  
Health Care cost: bills, co-pays, insurance, life insurance premiums: \$ \_\_\_\_\_  
Childcare, daycare, eldercare: \$ \_\_\_\_\_  
Taxes: \$ \_\_\_\_\_  
Debt or Loan Payments: \$ \_\_\_\_\_

**TOTAL ASSETTS:** \_\_\_\_\_ - **TOTAL LIABILITIES:** \_\_\_\_\_

**NOTICE TO SOCIAL SERVICE of Customer's Inability to Pay**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Our records indicate that we have not received your payment.  
**PAST DUE AMOUNT \$** \_\_\_\_\_ A payment of \$ \_\_\_\_\_ is due by  
DATE \_\_\_\_\_, or termination of service may occur any time after DATE \_\_\_\_\_.

SPECIAL PROTECTIONS -Household members are age eighteen (18) or younger or sixty-two (62) and older, have a medical emergency, are elderly, blind, or disabled. If YES check: \_\_\_\_\_

The CONFIDENTIAL ASSET EVALUATION FORM to assess Customer's ability to pay indicates **Customer's inability to pay.**

**TOTAL ASSETTS: less than - TOTAL LIABILITIES:**

New York State residential utility Customers may contact the Department of Public Service at any time concerning the utility service. Office of Consumer Services

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- o Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
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**SPECIAL PROTECTIONS Registration Form**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Third Party Notification/Authorized Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**SPECIAL PROTECTIONS** - Regardless of a Customers payment history relating to the utility bills, the residential utility service will be continued if the Customer’s health or safety is threatened, or if the Customer or a household member needs life support equipment.

If a **medical emergency** exists, the Company may request a medical certification notice from the Customer’s medical provider, doctor, or local board of health.

The utility’s service will be continued during the **Cold Weather Period** moratorium from November 1st of each year through April 15th of the following year.

Please immediately contact the Company to inform them that **Special Protections** should be applied to your account because the following conditions apply. Check: \_\_\_\_\_

Household members are age eighteen (18) or younger or sixty-two (62) and older, have a medical emergency, are elderly, blind, or disabled. Life Sustaining Equipment (LSE) is in use.

- Medical Emergency exists. \_\_\_\_\_
- Elderly. \_\_\_\_\_
- Blind. \_\_\_\_\_
- Disabled with permanent disability. \_\_\_\_\_
- Account holder receives government assistance. \_\_\_\_\_
- Public Assistance. \_\_\_\_\_
- Supplemental Security. \_\_\_\_\_

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- o Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am–7:00 pm)
- o Mail: Office of Consumer Services, NYS Department of Public Service, 3 Empire State Plaza, Albany, NY 12223/90 Church Street, New York, New York 10007.

**COMPLAINT HANDLING Residential Customer Complaint Form**

Utility Name  
Payment Address  
Phone Number, E-mail, website, hours of operation

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

The protocol for residents with questions, concerns, or complaints about their utility service or billing is as follows:

- First the Customer should contact the Company’s customer service representative and submit the concern or complaint including the action or relief requested for resolution of the complaint.
- The Company shall investigate and respond to the complaint, verbally and/or in writing within 15 days of the receipt of the complaint.

1. Describe the situation surrounding your inquiry or complaint, provide dates, names, amounts, and relevant details of the problem. Use additional pages if needed.

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2. Describe the resolution you are seeking.

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If the Customer believes the complaint has not been adequately addressed by the Company or at any time, they may contact the New York State Department of Public Service (DPS) at the Office of Consumer Services:

- Website: [www.dps.ny.gov/complaints](http://www.dps.ny.gov/complaints)
- Phone: DPS HOTLINE at 1-800-342-3377 (Mon.-Thurs. 7:30 am-7:30 pm, Fri. 7:30 am-7:00 pm)
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