

Specialist Name _____

Consumer Informal Complaint Form
Washington State Utilities and Transportation Commission
Consumer Protection Section

P.O. Box 47250

Olympia, WA 98504-7250

Statewide Toll-Free: 1-888-333-WUTC (9882)

Fax: 360-664-4291

Hearing Impaired Toll-Free - TTY: 1-800-416-5289

E-mail: consumer@wutc.wa.gov Web site: www.wutc.wa.gov

CONSUMER INFORMATION

Name on Account: Noreen Fitzwater

Your Name: fitzwater Noreen G
(Please Print or Type) Last First Middle Initial

Service Address: 12289 Seabeck Hwy NW

City: Seabeck County: Kitsap State: Wa. Zip: 98380

Cell Phone: _____ E-mail: lanove1931@gmail.com

Phone: Home: (360) 830-0135 Day/Work: () NA

Mailing address if different than service address: _____

Address: _____

City: _____ State: _____ Zip: _____

UTILITY OR TRANSPORTATION COMPANY INFORMATION

Name of Company your complaint is against: Waste Management

Address: _____

City: _____ State: _____ Zip: _____

Your Account Number: NA

Complaint Type: Residential Business

Continue on page 2

About Your Complaint

Please explain your complaint in detail (use additional pages if necessary):

I live up a 600' hill, away from the Seabeck Hwy where the cans are to be placed. I am 88 1/2 yrs old with the use of only one arm. I am physically unable to haul cans to the highway, WM does not come up my drive to provide me with service. Superior Waste and recycle would do this if allowed. I need them!

Total amount of the charges you are disputing \$: NA

Have you tried to resolve the dispute with your utility or transportation company? Yes No
If yes, what was the result?

When I initially contacted them they told me they would only provide service from the Seabeck highway location, not up my driveway.

What do you think the company should do to resolve your complaint?

began servicing drive ways and side roads or stay out of the way of companies that can provide service to the handicapped.

SIGNATURE

In filing this complaint with the Washington Utilities and Transportation Commission you are stating that the information you are providing is true to the best of your knowledge.

Note: Please be aware that the information you submit using this form is a public record. You may request that your personal information (name, address, telephone number, etc.) not be included in public records requests.

Moneen Fitzwater

Signature

9-27-19

Date

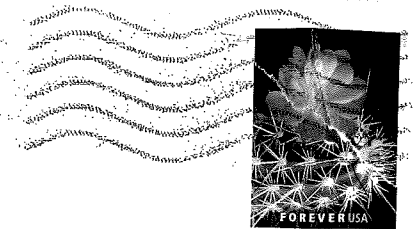
Check here if you would you like to receive UTC Connections our periodical consumer newsletter.

August 2009 CA-505-6

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Noreen Fitzwater
12289 Seabeck Hwy NW
Seabeck WA 98380

TACOMA WA 983
OLYMPIA WA
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Wa. Utility & Trans. Commission
621 Woodland Square Loop SE
Lacey, Wa. 98503

98503-10669

