

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: Nicole Board (act. closed ^{due to} unable to _{meet our needs})

Your Name: Board Nicole A
(Please Print or Type) Last First Middle Initial

Service Address: _____

City: _____ County: _____ State: _____ Zip: _____

Cell Phone: _____ E-mail: _____@me.com

Phone: Home: () same Day/Work: () same

Mailing address if different than service address: same

Address: _____

City: _____ State: _____ Zip: _____

UTILITY OR TRANSPORTATION COMPANY INFORMATION

Name of Company your complaint is against: Waste Management

Address: 9300 SW Barney White Road

City: Bremerton State: WA Zip: 98312

Your Account Number: no acct. # they couldn't meet my need
dropped service spec

Complaint Type: Residential Business

About Your Complaint

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

My Waste Management representative was very polite & thorough in search for a way to provide us with Home pickup service. I have a spinal co injury as does my 76yo husband. We are unable to get our cans up to Anderson St Mnt. assured me after using Google that they could not provide us with house pickup service there are NO charges in dispute.

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

After checking our small winding road on Google Maps their representative assured me Waste Management could not provide us the needed service. We have a receipt from Superior Waste & Recycling.

do you think the company should do to resolve your complaint?
STOP Superior Waste & Recycling from delivering badly needed services to this community.

SIGNATURE

By 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.

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

[Handwritten signature]