## Dourt # 130892

## RECEIVED

October 27, 2013

OCT 3 1 2013

WASH. UT. & TP. COMM

Utilities & Transportation Commission 1300 S. Evergreen Park Drive SW Olympia, WA 98504-7250

RE: Green Mountain H2O

10013 NW Hazel Dell Avenue, PMB #240

Vancouver, WA 98665

## Dear Ms. Andrews:

I am asking for a waiver in regards to the assessed late filing penalty for my 2012 Annual Report. The 2012 Annual Report was timely filed. Additional information was requested which was provided but due to bookkeeping issues the additional information was provided after the filing due date. I feel the penalty excessive as the original return was timely filed.

I appreciate you reviewing my assessment and hopefully you can waive the penalty. Due to the economic climate it would be very difficult to pay this penalty. Thank you!

Sincerely,

Dan Class

no Green! Pay your invoices online @ payments.utc.wa.gov

October 2, 2013 2150

Utilities & Transportation Commission 1300 S. Evergreen Park Drive S.W. Olympia, Washington 98504-7250 (360) 664-1349 Accounts Receivable (360) 664-1289 Fax Fedéral Tax ID: 91-6001121

DATE:

AGENCY NO:

INVOICE NO:

<u> 1846</u> - 2

TO:

Accounts Payable

**GREEN MOUNTAIN H2O LLC** 

PO Box 240

10013 NE Hazel Dell Ave., #240

Vancouver, WA, 98685

Reference	Docket Number	Due Date
Suspended penalty now due and payable.	UW-120865	Due Upon Receipt
Description	Contact Name	Amount
Suspended penalty now due and payable.	Perkinson, Mathew	\$600.00
Balance Due		\$600.00

Please return this portion with your payment

INVOICE NO:

1846 - 2

GREEN MOUNTAIN H2O LLC

TOTAL DUE:

\$600.00

Please remit payment to:

**Utilities and Transportation Commission** 

Attn: Financial Services

PO Box 47250

Olympia WA 98504-7250

Type of payment: (Do not send cash in the mail.)		
[_] Check [_] Money order Credit card: [_] AMEX [_] Discover	[_] VISA [_] Mastercard Exp date: Mo/Yr	
Certification: I, the undersigned, under penalty for false statement, correct, that I am authorized to execute on behalf of the applicant, a according to the card issuer agreement.		
Name, printed	*For information about online payments, see above.	
Customer's signature	Date	

AGENCY USE ONLY	
Receipt ID	
Payment ID	
Supplmental Info	
Amount Received	·
Date Received	

If you have any questions concerning this invoice please call Accounts Receivable at 360-664-1349

FINANCIAL SERVICES

2013 OCL 31 VW 8: 54

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