



Dear Customer:

Recently, you contacted us requesting a review of a dispute you may have with National Grid. In an effort to facilitate the resolution of your dispute, please complete the enclosed form.

Collection efforts on this disputed account will be suspended for up to 15 days. However, if we do not receive the necessary information from you, or your information is not complete within the 15 days, collection efforts will resume on the disputed amount. If we do not hear from you within the 15 days, we will assume that you do not wish to pursue this matter, and will consider your dispute inquiry closed.

Please return your completed form along with all required documentation within 15 days to:

National Grid
Attn: Accounts Processing - KEDLI
One MetroTech Center
Brooklyn, NY 11201-3948
Or Fax to: 877-277-4755

National Grid will notify you in writing of the final results of your dispute.

National Grid appreciates your interest in resolving this mutual area of concern and looks forward to serving your energy needs in the future.

Sincerely,

National Grid
Final Bill Dispute Team (AP)

Enclosure

FINAL BILL DISPUTE

Please read the following instructions carefully. Be sure to answer all questions pertaining to your dispute and attach the required documents or the form will be returned to you.

Account number: _____ - _____ Amount in dispute: \$ _____

Is this disputed information listed on your credit report? Yes No Unknown

Your name: _____

Current address: _____

Current mailing address, if different:

How long have you been at this address? _____

Current phone number: (____) ____ - _____

Your social security number: ____ - ____ - _____

(While not required, if you do not provide your social security number, you must submit two (2) alternate forms of identification.)

Previous address: _____

From: _____ To: _____

Previous address: _____

From: _____ To: _____

In order to process your dispute, you are required to answer all the questions that pertain to your dispute and send in all required documents. An explanation of required documentation and their descriptions is included for your reference.

If you are claiming that someone used your name and social security number without your permission, please fill out Section I - Fraud.

If you are claiming that you were billed beyond the dates that you resided at or owned the property, please fill out Section II - Billing Dates.

SECTION I – FRAUD

In order to process your dispute, you will be required to answer all questions in this section and send in the following documents.

- ❖ Acceptable **Proof of Residency** is required
- ❖ A copy of a **Police Report** is required
- ❖ If obtainable, a **Statement of Responsibility** can be sent in
- ❖ A copy of your **Birth Certificate** is required for **Minor** disputes only

1. What is the address you are disputing? (house number, street, city, zip code)

2. Did you ever live at the disputed address? Yes No

3. Do you know who lived there during the disputed dates? Yes No

If Yes: Who: _____ Relationship: _____

4. Where were you living during the disputed time frame? (house number, street, city, zip code)

4. Did you have National Grid services in your name at the time of this dispute?
 Yes No

If Yes, at what address? (house number, street, city, zip code)

With submission of this form you are claiming that someone used your name and/or social security number without your permission.

By signing below, I acknowledge that all of the above information is true to the best of my knowledge.

Your Signature

Date

SECTION II – BILLING DATES

In order to process your disputes, you will be required to answer all questions in this section and send in the following documents.

- ❖ Acceptable **Proof of Residency** is required
- ❖ A **Statement of Responsibility** is required

1. What is the address you are disputing? (house number, street, city, zip code)

1. What dates did you reside at or own the disputed address?

From: __/__/____ To: __/__/____

2. Did you call National Grid to disconnect service? If so, on what date did you call to have services disconnected at the disputed address? (Month/Day/Year). __/__/____

3. What telephone number did you call from to request disconnection of service? (Please include area code).

(____) ____ - ____

4. At the time of your disconnect, did you request new services at another National Grid address?

Yes No

If Yes, at what address? (house number, street, city, zip code)

DOCUMENTATION

Documentation to support your dispute is required. Below is a list of acceptable documentation and brief descriptions:

PROOF OF RESIDENCY for the disputed address or for the residence at which you actually resided during the disputed time frame. Acceptable forms of Residency include:

- Lease
- Deed
- Bill of Sale
- Notarized landlord statement (**requires signature of Landlord**)
- Recent mortgage statement
- Utility/Auto Insurance bills
- Vehicle/Voter Registration
- Statement must include landlord's name, address, phone number, landlord's signature, tenant name, lease start and end dates, leased address, tenant's signature and notary signature and stamp.

FORMS OF IDENTIFICATION - Two (2) forms of identification are needed **IF** you do not provide us with your social security number. Acceptable alternate forms of identification include:

- Driver's License/State ID Card
- Passport
- Benefits Card for DSS
- Military ID
- Permanent Resident Card/Green Card
- Sheriff's Card
- Work Stub
- Social Security Card
- Birth Certificate
- Student ID

POLICE REPORT - This is obtained by contacting your local police department in the jurisdiction where the fraud took place and explaining all the facts of your suspected criminal impersonation. **In the summary of the police report National Grid must be listed as a claimant as well as the amount in dispute and the person you suspect may have used your name illegally. You must be prepared to prosecute the person who fraudulently obtained service in your name to the fullest extent of the law.**

STATEMENT OF RESPONSIBILITY - This statement must be provided by the person who is actually responsible for your bill. The statement must include their full name, their social security number, current mailing address and current phone number. This statement must include the responsible person's notarized signature.

PROOF OF INCARCERATION - This document must be official incarceration papers and must include the date incarceration and the date of release.