



## DULUTH PUBLIC UTILITIES COMMISSION HEARING OF DISPUTES

### UTILITY APPEAL PROCESS

- An applicant who desires to dispute a department finding that is adverse to the applicant and is an appealable finding must do so within six (6) months of the occurrence that gives rise to the appeal.
- The applicant shall give written notice of the appeal on a form provided by the department. The appeal shall state the nature of the dispute and the basis for the appeal.
- The applicant shall also state the expected outcome of the appeal.
- The written notice should be mailed to the department director and the City Clerk's Office.
- The applicant will be notified by regular mail of the date, time, and location of the Commission's meeting.
- Any appeal involving a termination of services must be filed prior to the proposed date of termination to avoid action by the department.
- City staff will prepare a facts and findings report and present this report to the Commission prior to the meeting.
- The Director of Public Works & Utilities shall provide all information from the applicant to the Commission.
- Appeals shall be heard at the first meeting of the Commission following the filing of an appeal, if there are at least five (5) business days, exclusive, between the written filing and the meeting. Otherwise, the appeal will be heard at the subsequent meeting.
- The Commission has no power to cancel a debt to the department.
- All decisions of the Commission shall be binding on the department and the applicant, unless contrary to law.
- Decisions shall be in written form and sent to both the department and the applicant.
- Definition of an applicant: Any person or persons applying for water or gas service from the department and any guarantor of payment for such services as provided for in this chapter. (Section 48-1 Duluth City Code)

Form Created

June 2013



**City of Duluth Public Works and Utilities  
Utility Appeal Form**

Please provide all the information listed below and return form to Director, Duluth Public Works and Utilities Department, 211B City Hall, 411 West First Street, Duluth, MN 55802 with a copy to the Duluth City Clerk's Office, 330 City Hall.

Name of person filing this appeal must match the name on the utility account.

Name _____	Account # _____
Service Address _____	Mailing Address _____
_____	_____
Daytime Phone _____	Alternate Phone _____
E-mail (optional) _____	

Description of dispute or issue (attach additional sheets and any documentation, if needed):

Description of any action you are requesting or expected outcome of appeal:

I certify that the information I have given is true and accurate to the best of my knowledge.

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(Signature) \_\_\_\_\_ (Print Name) \_\_\_\_\_ (Date) \_\_\_\_\_

**Office Use Only- Date form received by Director's Office \_\_\_\_\_**  
**Hearing date and time \_\_\_\_\_**  
**Received by \_\_\_\_\_**  
**Appeal results: Accepted \_\_\_ Denied \_\_\_**