



BRIAN SANDOVAL
Governor

STATE OF NEVADA
PUBLIC UTILITIES COMMISSION

JOSEPH C. REYNOLDS
Chairman

ANN C. PONGRACZ
Commissioner

STEPHANIE MULLEN
Executive Director

Date: _____

Name: _____

Service Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ ext: _____ Cell: _____

Account Number: _____

Company/Utility Name: _____

Type of Service (i.e. gas, electric): _____

Description of your Complaint (*Please include copies of all supporting documents including bills, letters, photos or other material*):

Desired Outcome (*What do you want done?*):

Signature

Date

NORTHERN NEVADA OFFICE
1150 East William Street
Carson City, Nevada 89701-3109
(775) 684-6101 • Fax (775) 684-6110

<http://puc.nv.gov>

SOUTHERN NEVADA OFFICE
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