

# CLEVELAND PUBLIC POWER REVIEW BOARD HEARING REQUEST FORM

ACCOUNT HOLDER NAME: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_ DAYTIME PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Reason for Request (if additional space is needed please attach to form)


**Eligibility Checklist (Customer *MUST* meet ALL criteria)**

- Received shut-off/termination notice (1<sup>st</sup> Attempt Notice)
- Form filing date is within 10 days of receipt of shut-off/termination notice
- Residential Account (Non-Commercial)
- Person completing this form is the Account Holder for the bill

***I am the Account Holder, and request a hearing before the CPP Review Board concerning the contested outstanding balance on this account.***

ACCOUNT HOLDER SIGNATURE: \_\_\_\_\_

**Please Note:** If your request is found eligible, your account will be placed on hold from any collections activities until your case is heard before the board.

If you have any questions, please contact CPP Customer Service (216)664-4600.

You may submit your completed document and all required information by using one of the following methods:

- Bring to CPP Customer Service Representative located inside the Public Utilities Building at 1201 Lakeside Avenue
- Mail all documents to CPP Review Board, 1300 Lakeside Avenue East, Cleveland, Ohio 44114
- Fax to the Attention of CPP Review Board, (216) 420-7514
- Submit request via website [www.cpp.org](http://www.cpp.org)
- Email request form to [ReviewBoard@cpp.org](mailto:ReviewBoard@cpp.org)

**CPP Customer Service Representative**

SIGNATURE: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_