

CITY OF DURHAM UTILITY ACCOUNT BALANCE REVIEW FORM

Instructions: This form is for customers with closed accounts who disagree with the balance due in the collections process. After completing please deliver to General Billing and Collections, City of Durham, 101 City Hall Plaza, Durham, NC 27701 or fax to 919-560-4842. If you are a current customer, call 919-560-1200 or visit Customer Billing Services in City Hall for billing issues.

Customer Name: _____

CID: _____ Account #: _____

Service Location for bill: _____

Current Address: _____

City, State, Zip: _____

Contact Person: _____
(Name) (Phone)

Contact Information: Cell Phone _____ E-mail _____

I hereby request a review of my City Utilities account balance based on the following:
(Please give a concise and complete explanation/justification for the review and attach any appropriate documentation relevant to the situation.)

Service Account Customer Signature

Date

For Office Use:

Amount in Dispute: _____ Date sent to CBS: _____

Date received from CBS: _____ Amount Owed after Review: _____

Date Customer Notified: _____ Notified by: _____